### REPORT

OF THE

# HEALTH DEPARTMENT

OF

# THE PANAMA CANAL

FOR THE

CALENDAR YEAR

1920

### H. C. FISHER

Colonel, Medical Corps, United States Army Chief Health Officer

Gift of the Panama Canal Museum

THE PANAMA CANAL PRESS MOUNT HOPE, C. Z. 1921



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# THE PANAMA CANAL. HEALTH DEPARTMENT.

Operating under the direction of the Governor of The Panama Canal. Maintained from funds designated for sanitation in Panama Canal appropriations and revenues derived from its own operations. It exercises jurisdiction in health matters over the Canal Zone and the cities of Panama and Colon, Republic of Panama, and also cooperates with the Panaman Government in health matters in other parts of the Republic.

### LETTER OF TRANSMITTAL.

THE PANAMA CANAL, HEALTH DEPARTMENT, BALBOA HEIGHTS, C. Z., March 17, 1921.

Col. JAY J. MORROW,
Governor, The Panama Canal,
Balboa Heights, Canal Zone.

 $\mbox{Sir}\colon$  I have the honor to submit the following report of the operations of the health department for the year 1920.

Respectfully,

H. C. FISHER, Chief Health Officer.

#### HEALTH DEPARTMENT.

#### ORGANIZATION AND OPERATION.

The organization of the health department consists of: Chief Health Office, Balboa Heights:

Division of Hospitals and Charities-

Ancon Hospital, Ancon. Colon Hospital, Colon.

Corozal Hospital, Corozal.

Santo Tomas Hospital, Panama, R. P.

Palo Seco Leper Asylum, Palo Seco.

Dispensaries at— Colon Hospital.

Gatun.

Pedro Miguel. Ancon Hospital.

Balboa.

District Dentists at-

Colon.

Gatun.

Pedro Miguel.

Ancon.

Balboa.

La Boca.

Medical Storehouse, Ancon.

Division of Sanitation-

Health Office, Panama.

Health Office, Colon. Chief Sanitary Inspector, Canal Zone, Balboa Heights—

District Sanitary Inspectors at-

Gatun.

Pedro Miguel.

Ancon.

Balboa.

Division of Quarantine-

Chief Quarantine Office, Balboa Heights.

Quarantine Station, Colon.

Quarantine Station, Fort Amador. Quarantine Station, Bocas del Toro.

#### PERSONNEL.

(December 31, 1920.)

### Chief Health Office.

Balboa Heights.

Col. H. C. Fisher, U. S. Army, Chief Health Officer. Dr. D. P. Curry, Assistant Chief Health Officer.

### DIVISION OF HOSPITALS AND CHARITIES.

### Ancon Hospital.

Col. L. T. Hess, U. S. Army, Superintendent.
Dr. T. W. Earhart, Chief of Surgical Clinic.
Dr. W. E. Hubbard, Assistant Chief of Surgical Clinic.
Dr. R. C. Connor, Chief of Medical Clinic.
Dr. W. W. Braithwaite, Assistant Chief of Medical Clinic.

Dr. A. F. Ryan, Chief of Eye and Ear Clinic. Dr. T. H. Odineal, Assistant Chief of Eye and Ear Clinic. Dr. L. S. Townsend, Chief of X-ray Clinic.

### Physicians.

Dr. George Eugene. Dr. H. G. Hambleton.

Dr. L. S. Chapman.

Dr. M. A. V. Smith. Dr. D. L. Hollis.

Dr. C. D. Briscoe. Dr. H. K. Tuttle. Dr. P. G. Pomeroy.

Dr. James Burrow.

### Internes.

Dr. H. S. Liggett. Dr. F. E. Hyde. Dr. R. L. Ross.

Dr. J. G. Stoelzle. Dr. H. G. Campbell.

### Board of Health Laboratory.

Dr. L. B. Bates, Chief of Laboratory. Dr. H. C. Clark, Pathologist.

Capt. J. H. St. John, U. S. Army, Bacteriologist.

Mr. J. E. Jacob, Chemist. Mr. L. H. Dunn, Entomologist.

### Corozal Hospital.

Dr. Louis Wender, Superintendent.

### Physicians.

Dr. D. G. O'Neil. Dr. D. G. Sampson.

### Colon Hospital.

Maj. T. J. Leary, U. S. Army, Superintendent.

Physicians.

Dr. W. V. Levy. Dr. W. W. Cook. Dr. J. C. Scott. Dr. J. S. Vance.

Internes.

Dr. F. R. Brunot. Dr. Wayne Gilder.

Santo Tomas Hospital (Panama).

Maj. E. A. Bocock, U. S. Army, Superintendent.

Physicians on Panama Canal Roll.

Dr. C. C. Phillips. Dr. N. B. Kupfer.

Palo Seco Leper Asylum.

Mr. F. D. Tucker, Superintendent.

Cristobal-Colon Dispensary.

Dr. W. V. Levy, District Physician.

Gatun Dispensary.

Dr. J. A. Grider, District Physician.

Pedro Miguel Dispensary.

Dr. W. B. Meares, District Physician.

Balboa Dispensary.

Dr. I. E. Hix, District Physician.

Dr. L. O. Keen. Dr. R. L. Harvey.

Dr. J. R. Ernst.

Ancon Dispensary.

Dr. W. K. Olson, District Physician.

Dr. H. G. Bickford.

#### DIVISION OF SANITATION.

### Panama Health Office.

Dr. Henry Goldthwaite, Health Officer.

J. M. Carpprow, Sanitary Inspector. C. L. Pierce, Sanitary Inspector. N. C. Anderson, Sanitary Inspector. O. W. Searcy, Sanitary Inspector. B. C. Quinby, Building Inspector. H. A. Lewis, Vaccinator.

Dr. F. T. Eisenman, Veterinarian and Meat Inspector. Dr. H. L. Casey, Veterinarian and Meat Inspector.

### Colon Health Office.

### Dr. J. L. Byrd, Health Officer.

C. H. Bath, Sanitary Inspector. T. A. Leathley, Sanitary Inspector. M. M. Seeley, Sanitary Inspector. E. K. Turner, Sanitary Inspector. Geo. Campbell, Sanitary Inspector. W. S. Chidester, Sanitary Inspector. Dr. W. F. Gross, Veterinarian and Meat Inspector.
Dr. F. F. Dowd, Veterinarian and Meat Inspector.
Dr. F. F. Dowd, Veterinarian and Meat Inspector.

### Canal Zone Sanitation.

E. F. Quimby, Sanitary Inspector, Gatun District. I. W. Pickett, Sanitary Inspector, Pedro Miguel District. Geo. L. Willett, Sanitary Inspector, Ancon-Corozal District. John P. Corrigan, Sanitary Inspector, Balboa District. J. L. Tolar, Sanitary Inspector (Relief).

#### DIVISION OF QUARANTINE.

Chief Quarantine Office. Balboa Heights.

Surgeon W. C. Rucker, U. S. P. H. S., Chief Quarantine Officer.

### Cristobal-Colon Quarantine, Cristobal, C.Z.

Dr. C. A. Hearne, Quarantine Officer.

Dr. E. T. Lake. Dr. E. W. Torrey. Dr. P. Horwitz.

### Balboa-Panama Quarantine, Fort Amador, C. Z.

Dr. J. D. Odom, Quarantine Officer.

Dr. J. C. Hubbard.

Bocas del Toro (R. P.) Ouarantine.

Dr. W. J. Burke, Quarantine Officer.

#### VITAL STATISTICS.

#### EMPLOYEES.

The average number of employees on the rolls of The Panama Canal and the Panama Railroad, for the year was 20,673, as com-

pared with 24,204 for 1919, and 25,520 for 1918.

The total admission rates to hospitals and quarters was 671.84, as compared with 550.21 in 1919, and 405.67 for 1918. For disease alone the admission rate to hospitals was 183.91, as compared with 176.09 in 1919, and 136.60 in 1918. The total admission rate to hospitals only was 221.35, as compared with 210.92 in 1919, and 163.17 in 1918. (See Chart No. 1.)

The total death rate was 8.70, as compared with 7.23 in 1919, 8.11 in 1918, 7.09 in 1917, 6.03 in 1916, 5.77 in 1915, and 7.04 in 1914. The death rate from disease alone was 7.40 as compared with

6.20 in 1919, and 7.13 in 1918. (See Chart No. 2.)

The constantly noneffective rate from all causes was 14.87, as compared with 14.29 in 1919, and 11.02 in 1918. (See Chart No. 3.)

The admission rate for malaria, to both hospitals and quarters, was 19.40, as compared with 31.07 for 1919, and 18.55 for 1918. The noneffective rate for malaria was 0.45, as compared with 0.99 for 1919, and 1.13 for 1918. (See Charts 4, 5, and 6.)

The admission rate for typhoid fever was 0.24, as compared with 0.17 for 1919, and 0.24 for 1918. Three deaths from typhoid fever among employees occurred during the year.

The five diseases causing the highest number of hospital admissions with their rates, were as follows:

	191	9.	1920.		
	Ad- missions.	Rate.	Ad- missions.	Rate.	
Influenza Venereal diseases Malaria Diseases of the eyes and their annexa Tuberculosis (various organs)	194	12.60 22.31 28.01 8.02 3.34	621 552 401 152 82	30.04 26.70 19.40 7.35 3.97	

The five diseases causing the highest number of deaths, with their rates, were as follows:

	1919.		1920.	
	Deaths.	Rate.	Deaths.	Rate.
Tuberculosis (various organs)	23 19 1 21 21 18	0.95 .78 .04 .87 .74	30 22 21 13 11	1.45 1.06 1.02 .63

All rates given are computed as equivalent annual per 1,000.

#### EFFECTS OF RACE.

The admission rate to hospitals and death rate from disease, for white employees, were 267.06 and 3.63 respectively, as compared with 159.53 and 8.51 for black employees.

The admission rate to hospitals and quarters for malaria was 20.05 for white employees, as compared with 19.21 for black employees.

The death rate from disease for Americans was 3.32, as compared with 1.08 for 1919, and 3.38 in 1918.

#### CANAL ZONE.

#### EMPLOYEES AND NONEMPLOYEES.

From an average population of 27,469 in the Canal Zone, there was a total of 242 deaths during the year. Of these, 211 deaths were from disease, giving a rate of 7.68 as compared with 7.81 for 1919, and 9.69 for 1918.

The death rate from tuberculosis was 1.02, as compared with 0.83 for the preceding year, and 1.84 for 1918. Tuberculosis caused 13

per cent of all deaths from disease during the year.

There were 631 live births reported during the year, giving a birth rate of 22.98. (See Table VII.) Of these 231 were white, and 400 were black. Of the total births reported, 5 per cent were stillbirths.

Deaths among children, under 1 year of age, from all causes, totaled 60, of which 8 were white, and 52 black; giving an infant mortality rate, based on the number of births reported for the year, of 34.36 for white, and 130 for black children, with a general average of 95.09 per 1,000 births.

Of the total deaths, 25 per cent occurred among children under 1 year of age, and 38 per cent among children under 5 years of age.

Below is a table showing the death rates for the Canal Zone from 1905 to 1920, inclusive, from all causes among both employees and nonemployees:

Year.	Popula- tion.	Deaths.	Rate per 1,000.	Year.	Popula- tion.	Deaths.	Rate per 1,000.
1905 1906 1907 1908 1909 1910 1911 1911	23,463 34,095 54,036 67,146 76,900 86,465 90,434 79,279	828 1,700 1,708 1,273 1,025 1,251 1,385 1,129	35.29 49.86 31.60 18.95 13.33 14.47 15.32 14.24	1913 1914 1915 1916 1917 1918 1919 1920	31,447 227,543	1,047 710 410 343 313 236 229 242	16.97 15.31 12.83 10.91 11.36 10.59 8.64 8.81

<sup>&</sup>lt;sup>2</sup> Average population, excluding military population for last 6 months of 1917, the year 1918, and the first 6 months of 1919.

#### PANAMA CITY.

#### EMPLOYEES AND NONEMPLOYEES.

From a population of 60,500, based on a census taken this year by the Panamanian Government, there was a total of 1,297 deaths during the year. Of these, 1,246 were from disease, giving a rate of 20.60, as compared with 18.98 for 1919, and 20.92 for 1918.

The principal causes of deaths as compared with the preceding year, were as follows:

	Deaths in—		
	1919.	1920.	
Tuberculosis (various organs). Diarrhea and enteritis (including colitis). Pneumonia (broncho and Iobar) Nephritis (acute and chronic). Premature birth. Cancer (various organs).	241 152 171 84 25 35	20 17 16 7 4	

The death rate from tuberculosis was 3.40, as compared with 3.93 for 1919, and 4.14 for 1918. Tuberculosis caused approximately 16 per cent of all deaths from disease during the year, as compared with 20 per cent for the preceding year, and 19 per cent for 1918.

There were 2,376 live births reported during the year, giving a birth rate of 41.55. Of the total births reported, 6 per cent were stillbirths.

There were 369 deaths among children under 1 year of age, giving an infant mortality rate, based on the number of births reported during the year, of 155.30.

Of the total deaths, 28 per cent occurred among children under 1 year of age, and 40 per cent among children under 5 years of age.

Below is a table showing the death rate in Panama City from 1905 to 1920, inclusive, from all causes among both employees and non-employees.

Year.	Popula- tion.	Deaths.	Rate per 1,000.	Year.	Popula- tion.	Deaths.	Rate per 1,000.
1905 1906 1907 1908 1909 1910 1911 1912	21,984 25,518 33,548 37,073 40,801 45,591 46,555 47,057	1,447 1,142 1,156 1,292 1,038 1,446 1,456 1,380	65.82 44.75 34.45 34.83 25.44 31.72 31.27 29.33	1913 1914 1915 1916 1917 1918 1919	47,172 53,948 60,373 60,778 61,074 61,369 61,369 60,500	1,507 1,863 1,810 1,765 1,714 1,314 1,211 1,297	31.95 34.53 29.98 29.04 28.06 21.41 19.74 21.44

#### COLON.

#### EMPLOYEES AND NONEMPLOYEES.

From an estimated population of 26,078, a total of 554 deaths occurred during the year. Of these, 517 were from disease, giving a rate of 19.82, as compared with 20.55 for the preceding year, and 22.51 for 1918.

The principal causes of death, as compared with last year, follow:

	1919.	1920.
Tuberculosis (various organs).  Diarrhea and enteritis (including colitis).  Nephritis (acute and chronic).  Bronchitis (acute and chronic).  Pneumonia (lobar and broncho).  Organic diseases of the heart.	55 56 38 74	109 49 45 37 36 28

The death rate from tuberculosis was 4.18, as compared with 3.87 for the preceding year, and 4.45 for 1918. Of the total deaths from disease, tuberculosis caused 21 per cent.

There were 962 live births reported during the year, giving a birth rate of 38.88. Of the total births reported, 5 per cent were stillbirths.

There were 137 deaths among children under 1 year of age, giving an infant mortality rate, based on the number of births reported during the year, of 142.41.

ing the year, of 142.41.

Of the total deaths, 25 per cent occurred among children under 1 year of age, and 35 per cent among children under 5 years of age.

Below is a table showing the death rate in Colon from 1905 to 1920, inclusive, from all causes among both employees and nonemployees:

Year.	Popula- tion.	Deaths.	Rate per 1,000.	Year.	Popula- tion.	Deaths.	Rate per 1,000.
1905 1906 1907 1908 1909 1910 1911 1912	11,176 13,651 14,549 15,878 17,479 19,535 19,947 20,174	553 703 571 418 396 514 527 493	49.48 51.42 39.24 26.32 22.65 26.31 26.42 24.44	1913 1914 1915 1916 1917 1918 1919 1920	24,693 25,386 26,078 26,078	489 590 640 696 667 616 573 554	24.17 25.36 21.82 28.19 26.27 23.62 21.97 21.24

#### GENERAL REMARKS.

Malaria.—The number of admissions for malaria to hospitals and quarters shows a gratifying decrease from that of the previous year.

COMPARATIVE STATEMENT OF TOTAL NUMBER OF MALARIA CASES REPORTED DURING THE CALENDAR YEARS 1919 AND 1920.

	Employees.		Nonemployees.		Total.	
	1919.	1920.	1919.	1920.	1919.	1920.
Canal Zone, sanitated areas Canal Zone, cattle camps, etc	236 301	138 111	637 28	438	873 329	576 117
Canal Zone, miscellaneous unsanitated areas	21 70	18 20	47 69	17 21	68 139	35 41
Panama. Miscellaneous outside Zone (unsanitated)	62 62	30 84	119 462	70 268	181 524	100 352
Total	752	401	1,326	820	2,114	1,221

The reduction in the total number of admissions is marked in every district, but more especially in those areas where the greatest effort and improvement have been made in sanitation. In the report for last year was noted the heavy infection at Colon and Cristobal, the cause being located in the large swamps that lie to the south and east of these cities. Direct flights of Anopheles albimanus and tarsimaculata were demonstrated to have occurred into the northern part of Colon from the Margarita Road swamp, over a distance of 2 miles, 1 mile of which was across the open water of Manzanillo Bay. The work of draining these swamps has been carried on steadily through the past year. The Army sanitary inspector has extended and elaborated his system of ditches in the Margarita Road swamps until this area is practically free from any extensive mosquito breeding places. Pastures lying within 1 mile of Mount Hope and the Cristobal dry dock were evacuated of their cattle and open drainage ditches installed.

The sanitary inspector of the Mount Hope district (Cristobal), having about completed the installation of earth ditches in most of his wet areas, has begun permanent construction by converting them into rock and tile drains where it is possible to do so, or by laying sectional half-round concrete bottoms where flat grades or absence of rock preclude the use of the covered tile. Not only has the malaria incidence shown a great decrease, but the capture of adult anopheles (a work carried on both as an index and as a valuable antimalarial measure) indicates that the sources of the great majority

of these mosquitoes have been effectually controlled.

No new work has been done in the Gatun district, except for the change of the drains of a small area immediately adjacent to the west side of the locks from an open ditch system to rock and tile, and the filling of a small pond and a few unnecessary old ditches. The adult mosquito catch of the past wet season demonstrated that the draining (in 1919) of the large swamp west of the old French canal has abolished the chief source of the hordes of anopheles that annually had invaded this city. (See Report for 1919.)

The new Army camp at Fort Davis was completed and occupied in October. While the sanitation done by the Gatun district inspector affords a large degree of protection to this post, its situation north of Gatun, toward the low-lying swampy pastures of The Panama Canal dairy, will require much further extension of work in that

direction in order to fully protect the camp.

The Pedro Miguel district is being further improved by conversion of open ditches in the adjacent former cattle pastures to rock-covered tile drains. The removal of the cattle from these pastures has greatly reduced the number of adult anopheles caught, and has also lessened

the cost of control of these areas.

The Dredging Division, pumping from the canal prism spoil deposited there as a result of recent movements in the slide at Cucaracha, found it necessary to spill this material into the old Rio Grande valley opposite Paraiso. The heavier material was deposited satisfactorily, forming a porous fill that can be easily drained. The lighter material, however, was carried down the stream, to be deposited in the arm of Miraflores Lake adjacent to Pedro Miguel locks, converting much of this area into a shallow lagoon, barely covered by water, which, as vegetation becomes established, will

doubtless be converted into a troublesome and costly breeding place. The new channel of the Rio Grande (straightened and dug by the Health Department the previous year) was blocked, and the river once more became a shallow, widespread, meandering stream, Drainage ditches discharging into the stream were choked with silt. and this fine amorphous material completely filled the rock and tile band ditch at the foot of Paraiso hill, necessitating its removal. Thus was undone, in a few weeks, practically all of the excellent work of the previous year in this area by the district sanitary inspector. Following the withdrawal of the hydraulic dredge, the Dredging Division furnished the sanitary inspector a gang of men who cleaned out some of the ditches and did what was possible to restore the drainage system, but without being able to restore its former efficiency, nor will it be practicable to do so if, as seems likely, this area is to be used again as a dumping ground for spoil from the Canal. Under present conditions, only temporary expedients and costly maintenance can be attempted. The Chief Hydrographer has presented a plan for raising this arm of Miraflores Lake to the height of Gatun Lake (from 54 to 85 feet, approximately), thus giving the former an increase of depth of over 30 feet, and a considerably larger area. While this has been proposed mainly because of its effect on the water supply of Gatun Lake and the surges in the cut affecting shipping, it would greatly benefit the sanitation of Pedro Miguel. through the conversion of a large, wet area into a deep lake with fairly clean, steep banks.

In the Ancon-Corozal district nearly 10,000 feet of permanent rock-covered and open concrete ditches were constructed. The latter type of construction—that of the open half-round, sectional, concrete ditch bottom, as described in the report for 1918, of which several thousand feet have been installed, has not been found as satisfactory as was at first hoped. In the jungle, where there are many large deciduous trees casting their foliage, these drains easily and frequently become blocked, allowing the formation of many small collections of water, and requiring to be cleaned frequently. Although more easily swept and maintained than open earthen ditches, the constant care necessary to prevent breeding during times of slight precipitation makes them a constant source of danger and expense; therefore most of the ditches of this type are being closed in by sectional cast covers and broken rock. In future construction practically all permanent work will be done with 6- or 8-inch concrete tile, made by this department, and covered with broken stone. Only in the Mount Hope district, where there are large, nearly flat, alluvial marshes, and where there is a scarcity of stone, will the open form of concrete ditch be constructed to any

great extent.

Fort Clayton, north of Corozal, was finished and occupied in October. A number of malaria cases have developed there among the enlisted personnel and the catch of adult anopheles has been large. The Army sanitary inspector has devoted his efforts to clearing the jungle from the edges of streams and in valleys adjacent to the post, and has uncovered many springs, obstructed streams and seepage places. The Rio Cardenas, flowing by the south side of the camp, has many pools caused by bars, rocks, and drift, overhung with grass, in which prolific breeding occurs. These conditions are being

corrected as rapidly as time and funds permit, with considerable improvement already to be noted in the malaria and anopheles index.

In the Balboa district the large hydraulic fill west of the Canal, opposite Pier 18, has given rise to anopheles breeding in those parts where fresh water from the high land at the back runs out over the fill. Some of this material is still too soft to bear the weight of a man and it has been found possible to spread a mixture of black oil and larvacide by throwing waste, soaked in the mixture, out onto the fill.

In order to determine whether malaria occurs on vessels visiting Canal ports or transiting the Canal, the Surgeon General of the Navy was requested to have medical officers of Navy ships visiting the Canal report directly to the Chief Health Officer any cases of malaria developing aboard ship following such visit. Blanks for reporting cases have been prepared and will be supplied to the ships by

quarantine officers on arrival.

The Panama Health Officer still emphasizes the need for sanitating the Sabanas area east of the city. The greater number of cases occurring in Panama live in the San Miguel and Calidonia districts, east of the Panama Railroad, and near the Sabanas car line. Doubtless many of these cases are contracted directly from visits to the unsanitated areas, but there is also the probability that anopheles fly into the city from the Sabanas. These sections of the city are occupied mainly by West Indians living in unscreened tenements.

In the foregoing table, the only increase in number of malaria cases is in that of employees contracted in "miscellaneous unsanitated areas outside the Zone." It has required frequent reminders to the residents of the Zone, that, although malaria is not so prevalent in the sanitated areas as it once was, the danger exists in other sections of the Isthmus in unabated form. In fact, the comparative safety of the sanitated areas does much to lull their apprehension of other

areas and many carelessly take risks that are unjustifiable.

Malaria from cattle camps and plantations also shows a marked reduction, believed to be due largely to the continued use of prophylactic quinine. While it is admitted that this procedure is not ideal, and that, under ordinary circumstances, there are better ways of controlling malaria, the isolation of these camps, their temporary nature, and the class of labor (these being largely recruited from the infected native population) seem absolutely to require the use of quinine. Every evening for the first two months following the beginning of employment, each man is given  $2\frac{1}{2}$  ounces of an alcoholic solution, containing 10 grains of quinine sulphate. After this first period of 2 months, each man is given the same dose morning and evening of each Wednesday as long as he remains in camp. While this treatment is not compulsory, by the cooperation of the foremen it is fairly well carried out, and the malaria incidence has been lowest in those camps where the prescribed measures have been followed closely.

For the sterilization of malaria carriers and the "follow up" treatment of cases of malaria the Chief Health Officer has approved, as the standard for routine treatment, the administration of 10 grains of quinine sulphate by mouth, every evening before retiring for a period of 8 weeks. This is the procedure recommended by the subcommittee on medical research of the National Malaria Com-

mittee.

Malaria at Army posts.—The Department Surgeon of the Army reports a gratifying improvement in the malaria rate of troops on the Canal Zone, the rate for 1920 being better than in any previous

The comparative rates for the past 3 years are:

	1920.	1919.	1918.
Noneffective rate per 1,000	1.12	2.43	1.92
	47.38	54.37	66.037

For the control of mosquito breeding the Army sanitary inspector reports that, as part of the permanent work with the allotment for this purpose, drains and fills were made by him as follows:

	Dirt drains.	Concrete	Rock a		
Station.		drains.	6" tile.	8" tile.	Fills.
Corozal. Port Clayton Panama secondary Fort Davis. Fort Sherman France Field Fort Randolph	Feet. 2,295 135 1,200 2,000 11,223 19,734 24,436		2,791	Feet. 139	
Totals	62,203	1,902	5,314	714	3,215

Typhoid fever.—There were 36 cases of typhoid fever, of whom 9 died. Five employees, 11 nonemployee residents of the Isthmus, and 19 nonresidents had the disease. Of these, 3 employees (black), 1 nonemployee (black), and 5 nonresidents (4 black, 1 white) died. The nonresidents were all ill upon arrival on ships and did not become infected upon the Isthmus. The cases developing locally were sporadic, except for 4 cases in one family from a small pueblo in the country near Panama City. No other cases developed in that vicinity after the discovery of the infection.

Every local case was carefully investigated as to its origin; contacts were examined for typhoid bacilli, resulting in the discovery of but 2 carriers, 1 an enlisted man in the Army and the other a patient of the hospital for the insane.

Influenza.—There were 1,314 cases of influenza reported from the Canal Zone and adjacent territory, of whom 62 died (see Tables IV,

X, and XXIII).

The epidemic started the first part of March, 1920. Cases of influenza were reported as follows: March, 801; April, 314; May, 40; June, 138. The first cases were from Colon, but later cases were reported also from all parts of the Canal Zone and Panama and its suburbs. The schools, picture shows, and other places of assembly were closed for a period of 2 weeks. The majority of cases reported were among people who were ill-fed and physically weak—owing to their poverty—which condition was markedly prevalent immediately after the strike of February 24 to March 4. The epidemic probably started from the fleet of United States Navy vessels stationed in Colon Bay from February 19 to March 1, of which the steamship Colombia had 10 cases and the steamship Pennsylvania 5 cases on board; the fleet reported 30 cases before arrival in Colon. The rise shown in number of cases reported during the month of June was the result of a local epidemic at the cattle pasture camp at Manawa, there being 82 cases from this camp during June. On March 21, 1920, a ship from Ecuador was received at Balboa quarantine with 6 cases of influenza on board; June 23, 1920, a ship from Peru was received at this station with 23 cases on board; in both instances the local passengers were detained in quarantine 3 days, and the crew and other contacts among agents and port employees were observed and temperatures taken for 3 days. No new cases developed.

Smallpox.—There were reported 25 cases of smallpox during the year, 14 from Panama City and 11 nonresidents. The disease did not at any time become epidemic. The chief source of the infection is from the interior of the Republic, in which smallpox remains endemic, as but few native Panamans outside the cities of Colon and Panama

are vaccinated. There were no deaths from smallpox.

Rats and anti-plague work.—Second only to malaria control is the problem of rendering the Isthmus safe from an invasion of bubonic plague. But two cases have originated on the Isthmus since the American occupation. (In 1905 at La Boca, 2 laborers developed the disease and died. A vigorous rat campaign in the vicinity followed and but one infected rodent was found. Apparently the

disease was stamped out.)

But bubonic plague exists in North, Central, and South American ports, necessitating strict care in quarantine and internal measures against rats. In building Panama Canal piers and docks every precaution was taken to make them rat-proof. In addition to rat-proof construction of buildings, a circular of the Governor requires all building material, forage, and other stores to be placed so as to discourage rat harboring and favor their elimination. One of the most valuable measures is the placing of practically all kinds of materials on elevated racks, with a minimum of 12 inches clear space below, with open aisles at short intervals between, permitting inspection, trapping, and poisoning and also discouraging the wary rodent from nesting therein. In keeping food from rats the utmost vigilance is exercised. In shops and warehouses have been designated certain places only in which the men may eat their lunches so as to facilitate the collection and removal of all scraps of food. The keeping of chickens and pet animals in the Zone is restricted in order not to furnish food for rats.

Evidence accumulates as to the very large quantity of rats living in the jungles and pastures. At times migrations seem to occur and they have been seen swimming in large numbers in the Canal and lock chambers. The sylvan rat is not so wary as his city brother and is easily seen and caught. During clearing operations about one of the new Army camps the laborers killed hundreds of rats daily. A number of these rats were captured and they and their fleas have been sent to the Bureau of Biological Survey at Washington for

identification. Fleas are numerous on the jungle rats.

Trapping and poisoning is regularly done in the terminal cities, chiefly to obtain rats for the laboratory, to which all rats, alive or dead (if not too badly decomposed) are sent for examination. No

plague-infected rats have been found.

Of the poisons used, barium carbonate has proved most effective. Many ways of preparing the poisoned baits were tried, in addition to the routine methods of mixing with meal, flour, or chopped fresh meat. In one commissary storehouse, the powder sprinkled on a half cantaloupe caused the death of 24 rats in one night. The health officer of Colon reports the best results, as well as facility in handling the baits, from mixing the barium carbonate in proper proportions in dough and baking as a loaf of bread. Split cucumbers, with the powder sprinkled inside, also proved alluring to the rodent appetite.

It was also attempted to catch rats by means of a viscous, slow-drying varnish spread on baited metal plates, hoping thereby to catch not only the rats, but their fleas as they left the dead bodies. This method proved more efficacious in catching mice, as the rats were generally too wary to become entangled in the varnish. It was shown, however, that once a rat stepped upon the plate his death

was certain.

Garbage disposal.—The new incinerator at Colon was completed

sufficiently to place it in operation in September.

At this incinerator is destroyed all the garbage of the cities of Colon and Cristobal. Previously the garbage had been burned in the open on dumps, and later, on a temporary, unsheltered, rail incinerator. During the rainy season especially it was very difficult to destroy the garbage by these methods; flies were bred abundantly and numbers of rats were attracted and fed. Following the beginning of operations by the new incinerator the fly infection of the two cities was notably decreased and now the district is as comparatively free

from flies as can be expected.

The incinerator on Gavilan Island, destroying garbage from Panama, Ancon, Balboa, Amador, and other places at the Pacific terminal of the Canal, was closed for repairs in December, necessitating, for the time being at least, other methods of handling the garbage. The Health Officer of Panama undertook to dispose of this material on the dump near the beach just outside the city. Each day's collection was brought out in the morning, beginning very early. Every load as it arrived and was dumped was thoroughly sprayed with a solution of larvacide (crude phenol, lye, resin soap liquid) to destroy adult flies and as many larvæ as possible. After placing on the dump and leveling it off, the garbage was covered with 4 to 6 inches of earth to prevent infection by flies. Twice daily thereafter, for 10 days following placing in position, the surface of the dump was sprayed with the larvacide solution. The results were surprisingly good. Large areas of low wet land were filled, with some subsequent sinking, of course, but not enough to restore their bad features. Nuisance from odors and unsightliness did not develop. Some flies, of course, emerged and escaped without being destroyed, but there was nothing like the tremendous breeding that occurred at Colon when garbage was burned in the open. Rats have not been apparent about the dump. Possibly they are repelled by the crude carbolic acid emulsion spray with which the ground is sprinkled. The operation of the dump proved to be much cheaper than incinerating.

Should it prove advisable to continue this method of garbage disposal, there are troublesome low areas, such as the ditches alongside the Curundu River flume, that can be filled with garbage and other refuse, with great permanent advantage to the sanitation of those

laces.

Venereal disease campaign.—In its basic elements the venereal disease situation remains practically unchanged. Situated at the terminals of the Panama Canal, the cities of Colon and Panama are daily visited by hundreds of seamen of commercial vessels of various nationalities and sailors of the United States Navy, and also by soldiers of the United States Army on the Canal Zone. The constant influx of this type of transient males is naturally calculated to attract a multitude of prostitutes from other countries, as well as native ones, who, learning of the rich harvest to be reaped here, and the light restrictions on their freedom, consider these cities fruitful fields for their activities. A very large proportion of these women, as may be expected, are infected with venereal diseases.

Intimately associated as are the Americans and others living on the Canal Zone with the two Panamanian cities, the problem of venereal disease causes the greatest concern to the authorities of the Canal. Since 1904 there have been about 30,000 cases of venereal diseases among employees and their families treated by Canal physicians. Doubtless a great number of infections escaped being treated and

reported.

At a meeting of representative American and Panamanian citizens in 1919 was adopted the "Program of Attack on Venereal Disease" as outlined by the Surgeon General of the United States Army during the World War; but this program has never been satisfactorily carried out because of the radically different viewpoint of

the Panamanian people.

In the beginning of the campaign it was not considered advisable to attempt radical law enforcement measures. Effort was directed toward means for diagnosis, treatment and prophylaxis of venereal disease, and toward a general campaign of education to build up sound and clean public opinion, hoping that proper laws and their enforcement might be a later development.

Venereal disease clinics were established at Colon and Panama. The clinic at Colon, opened March 1, 1920, is maintained by the American Red Cross. The Panama clinic was opened August 25,

1919, at Santo Tomas Hospital.

The Colon venereal clinic.—In the 10 months of operation of the Colon venereal clinic, 666 patients were admitted, classified as follows:

	Men.	Women.
Syphilis	56	54
Gonorrhea Chancroid	183 71	57 25
Syphilis and gonorrhea. Gonorrhea and chancroid. Syphillis, gonorrhea, and chancroid.	6	5
Miscellaneous (nonvenereal)	45	125

	Men.	Women.
Arsphenamine (doses given)	18 37 4 12 10	364 256 60 (1) 101 5

Wassermann tests: Ninety-one positive, 261 negative, 26 doubtful.

Although the above table shows a fraction less than 58 per cent of the women to be infected, this figure is conservative and probably misleading, as wherever a record is doubtful it is counted as a negative. It is also realized that of the 60 "apparently cured" cases a number may remain infectious, because of the known difficulty of curing chronic gonorrheal endocervicitis by topical applications, and also from the fact that the women usually take a chemical douche before coming to the clinic for examination. Three successive negative smears are required before the case is discharged.

The average number of visits of infected men to the clinic was so small that but little benefit could be expected from the treatment given. Not a man ever completed the course of antisyphilitic treatment. The chief progress was achieved with syphilitic women, most of whom, being compelled to come to the clinic, received sufficient treatment to render them noninfectious for the present at

least.

The Panama venereal clinic.—The work of this clinic at Santo Tomas Hospital has been especially valuable. At first but one physician and two nurses were employed, but as the work grew it became necessary to add a second physician to the staff. From an average of 30 or 40 patients daily, the number has grown to over

100 a day, men and women coming on separate days.

The fee for service in the clinic is 10 cents for each applicant registered. This purchases an admission ticket which thereafter entitles the holder to entrance to the clinic. Drugs or prescriptions to be taken to the patient's home are sold at actual cost and patients that are absolutely unable to pay are given free medicine. No charge is made for medicines or dressings used in the clinic. For Wassermann tests the fee is \$2 when the patient is able to pay, but it is given without charge to the poorer patients. Salvarsan is sold at varying prices; to patients who are well able to pay, \$5 per dose is charged; patients unable to pay full price, but capable of contributing something, are charged \$2 per dose; charity cases are furnished free injections when they have no money and would be a menace to the public health if left untreated. Spinal punctures are charged for in the same manner and at the same rate as the Wassermann tests. At present the receipts from the clinic are sufficient to meet all its expense and it is now entirely self-sustaining.

All laboratory work for the clinic is done by the laboratory of the hospital and prescriptions are filled and stock remedies supplied by

the hospital pharmacy.

A complete record of every case is kept by the nurse in charge of the records of the clinic. Patients are given literature covering the principal points in their disease, and advice as to how to get well by carrying out certain measures and how to prevent the spread of their disease to noninfected individuals. Every new case is investigated in order to locate the source; when the origin can be found, the infected individual is rounded up by the police and held in the detention ward at the hospital for treatment.

In connection with the department of treatment a prophylactic station is maintained and kept open day and night. This station has been widely advertised to the local population and to all incoming ships, and many sailors have taken advantage of the privilege. Since the clinic has been in operation 3,263 prophylactic treatments have

been given to men of many nationalities.

A third department is also operated by the clinic, in which all prostitutes that report under the provision of Degree No. 12 of 1918 (Panama) are examined. Under existing laws all these women are supposed to report weekly for examination, but this state of affairs has never yet been, and never will be, realized. By working in connection with the health officer of the city and the inspector of police, it has been possible to increase greatly the number of prostitutes who report weekly. In the beginning only a small number came, but at present this has about been trebled, and the outlook is encouraging. A physical and microscopical examination is made on each case, and every woman found in an infectious state is confined to the hospital for treatment. The noninfected individuals are allowed to return to their abodes. Free antiseptics are furnished these women to take to their homes, with instructions as how they are to be used, and at each weekly visit to the clinic they are questioned regarding their supply and its application.

While in the hospital the infected women are not idle, since a large workroom has been established in which they are made to sew, roll bandages, and pack gauze and cotton, while being treated. It is found that this exercise tends to encourage these people and to maintain them in a more cheerful and tractable frame of mind. It is shortly planned to add a small hand laundry to the work which they are now doing. In addition to helping the hospital while they are confined there, it is hoped to teach at least a part of them an occupation, and later to secure positions for them, so that it will not be necessary for them to return to their former lives upon release

from the hospital.

In the accompanying report of Santo Tomas Hospital (q. v.) are given the statistics of the work of the clinic for the year 1920.

It is felt that the educational advantage of the clinic can not be overestimated. Patients report to the clinic from homes which are in many instances wonders of squalor, filth, and disorder. Some of them have been previously treated by quack doctors or by physicians poorly equipped both in knowledge and appliances. To visit a clean, well-furnished room, equipped with shining modern appliances and in charge of a competent physician and nurse, works a wonderful transformation in the minds of these patients. They feel that something worth while is being done for them, and the mental attitude is so much improved that their physical condition reacts accordingly. The patient is made more hopeful, and not only does he return as directed until his condition is improved, but he spreads the news of his recovery to many people of his acquaintance.

While the results that have been accomplished are gratifying, it is thoroughly realized that the field has hardly been touched. So widespread is the feeling in the Republic that prostitution is a necessary evil and that venereal disease is of little consequence, that it is practically impossible at the present time to carry on a campaign that will accomplish more than a limited amount of good results. The best that can be hoped for now is to spread as much favorable propaganda as possible and to attempt to educate the people to a point where, a little later, laws may be enacted which will bring about the abolition of commercial prostitution. At present the lawmakers as well as the populace are against any attempt at abolition; consequently it would be futile even to think of accomplishing it under the present government. However, by carrying on the educational work in a vigorous manner for a few years, it is felt that it may ultimately be possible to secure the passage of laws which will eliminate recognized prostitution from the city and limit to a minimum the incidence of venereal disease.

Examination of school children.—The annual physical examination of school children of the Canal Zone was made, starting in October.

The results for the white children were as follows:

Number of children examined	1,835
Number found needing treatment	860
Number with defective teeth as only defect.	398
Number with defective teeth as only defect.	400
Number with defects other than teeth only	462
Defects found.	
Teeth	519
Vision	
Hearing	
NT1 L41	
Nasal breathing	33
Hypertrophied tonsils	167
Orthopedic	4
Pulmonary	2
Malnutrition	3
Carlia	11
Cardiac	11
Chorea and other nervous diseases	
Contagious diseases	10
Miscellaneous	28
Number vaccinated.	103
Number vacchiated	

The parents were notified in each case when defect was found, and advised as to proper treatment either by the district physician, in a Panama Canal hospital, or by a dentist. Of the total 935 defects found, but 221 were reported as having been treated. This can not be accepted as an accurate figure, however, as treatment was undoubtedly given in many cases, but not reported to the district physician who made the original physical examination. No record was kept of the defects found in the colored children, but proper advice was given at the time of examination by the district physician.

#### PANAMA HEALTH OFFICE.

### (Dr. Henry Goldthwaite, Health Officer, Panama City.)

Malaria.—The following table of malaria cases charged to the City of Panama for the years 1914 to 1920, inclusive, shows practically the result of intensive work on the part of this office:

1914	2	2.154
1915		614
1916		235
1917		187
1918		97
1919		181
1920		100

There is no reason to believe that the source of infection in the 100 cases reported for the year just passed, charged to the City of Panama, was from within the city; as it is hardly possible for anopheles to come to maturity within the district under charge of this office, the infection doubtless comes from areas beyond our present control. The consumption of crude oil by this office per annum shows graphically fills made and ditches straightened and eliminated:

#### ANNUAL CONSUMPTION OF OIL.

	Gallons.
1917	
1918	
1919:	
1920	9,365

Attention is again invited to the necessity for the sanitation of that district near the city known as "Las Sabanas"; the district in question is more or less thickly populated, from the terminus of our present sanitated area, the Tumba Muerta Road, to the Rio Abajo. The area could be sanitated without much trouble, and at a moderate expense. This should be done not only for the benefit of the Panamanians but for the many employees of The Panama Canal who use the Sabanas Road for pleasure trips; the use of this road will constantly increase, with a corresponding increase in the cases of malaria, as the improvement of the Sabanas Road progresses toward Chepo.

Infant mortality.—The following shows the annual death rate of infants under 1 year of age for the years 1914 to 1920, inclusive:

	Rate per thousand.
1929	 . 199.90

Smallpox.—A total of 14 cases of smallpox was reported as having occurred in the city of Panama during the year 1920; these cases all originated from points outside of the city. During the year 17,294 persons were vaccinated by this office. Many of these vaccinations were done on persons entering the City of Panama by water from other parts of the Republic, which is beneficial in so far as it relieves us of the care of smallpox patients and, of course, is gradually lessening the danger of infection from the interior.

There was issued a total of 3,205 vaccination cards to persons leaving the Republic by sea. The majority of these individuals were

West Indians.

Veterinary work.—Fees collected as a result of the work of veterinarians attached to this office amounted to \$3,586.99, which sum includes fees collected for inspection of cattle and swine and dis-

infection of hides and skins.

There were 15,023 head of cattle and 11,402 hogs killed and inspected at the Panama abattoir under the supervision of our veterinarians. Of these the following were condemned: *Cattle*—Septicemia, 8; anthrax (died in pen), 3; infiltration and ecchymosis, 3; sunstroke, 2; tuberculosis, 1; gangrene, 1; asphyxia, 1; steers

(cause not stated), 5; total, 24. *Hogs.*—Measles, 609; sunstroke, 59; sucklings (cause not given), 18; cholera, 10; gangrene, 3; tuberculosis, 2; tetanus, 2; pyemia, 2; urtricaria, 1; pneumonia, 1;

total, 707.

Flies.—The use of fly paper and fly traps has practically been abolished by this office. We are using instead wires, dipped in what might be termed "tanglefoot mixture." This method seems to be more successful, but of course the main point in the elimination of flies is in the destruction of their breeding places. This is being continually done, but no city of this size can ever hope to be abso-

lutely flyless, and it is a constant fight.

Milk and dairies.—The milk situation continues to improve. A more or less flexible standard of 300,000 bacteria per cubic centimeter for raw milk has been set by this office, and the present bacterial count shows many samples having considerably less than 100,000 bacteria per cubic centimeter. With the passage of time, the dairy owners are becoming aware of the fact that cleanliness means more money to them. It is but a repetition of the history of all cities where supervision of the milk supply has been attempted. Possibly we have had less trouble than in any place in the United States of similar size, mainly for the reason that the orders from this office are mandatory, and there is practically no appeal therefrom.

The "Lecheria Central," or central plant to which all milk from the various dairies is sent, was opened for service in January, 1920, since which time no milk has been sold in the city except that which is pasteurized at this plant. The lecheria is owned and operated by the dairymen's association. A limited quantity of clean, fresh butter is also produced by the plant. As soon as an adequate supply of bottles of the standard size (1/5 gallon) can be secured it will be required that all milk be also bottled at the plant and that no loose

milk be sold.

Fines.—There were 1,425 fines imposed for violation of sanitary

regulations and \$2,684.50 collected as a result thereof.

Garbage disposal.—At the time this report is written we are burying all garbage from the City of Panama and the terminus of the Canal, owing to the necessity for extensive repairs on the Cavilan Island incinerator. This method of disposal is being done at an approximate cost of \$1,265 per month for the total work, as against a 3-year average of \$2,410.64 per month for incineration of the garbage from the City of Panama alone.

Venereal diseases.—During the year 395 cases of syphilis were reported to this office and 1,111 cases of gonorrhoea; this by no means represents the actual total, as it is almost an impossibility to have physicians report their venereal cases; constant urging

seems to have little effect upon them.

Tuberculosis.—The number of deaths from tuberculosis for the years of 1914 to 1920 inclusive, are as follows:

1914		
	· · · · · · · · · · · · · · · · · · ·	
	· · · · · · · · · · · · · · · · · · ·	
1920		

The Health Officer is of the opinion that the number of deaths from tuberculosis will be largely reduced if we can enforce the regulation requiring each person to have at least 300 cubic feet of air space in living quarters. The enforcement of this regulation would not only tend greatly to reduce the number of deaths from tuberculosis but should naturally result in a reduction in the infant mortality rate.

#### COLON-CRISTOBAL HEALTH OFFICE.

### (Dr. J. L. Byrd, Health Officer.)

The new concrete Panama Railroad stables, thoroughly rat-proof, offering every facility for cleanliness, and affording accommodation for all the privately owned animals of the city, were completed during the year and all the old unsanitary private stables in the city have

been demolished.

The new garbage incinerator was placed in operation on September 1, and has been operating continuously ever since. It has two 30ton units, or a rated capacity of 60 tons in 24 hours, but as at present operated it is consuming an average of 60 tons in 16 hours of each day, 50 per cent more than the rated capacity. No fuel is used, yet all kinds of garbage, manure, and rubbish are consumed without. difficulty. By the addition of another unit, of 50 tons capacity, the operating expense could be reduced, possibly, by 30 per cent and much of the wear and tear of present machinery from overwork would be prevented.

The improvements in stables and garbage incineration have practically eliminated all the principal fly-breeding areas in Colon and for the past 3 months the city has been remarkably free from flies.

Several improvements were made in the Colon municipal market during the year. A new roof with skylights was placed on the building, the wooden vegetable counters were replaced with concrete slabs and the meat stalls were inclosed by wire netting.

Infant mortality.—The infant mortality rate during 1920 was 142.41 as compared with 155.29 for 1919. The rate continues to remain high, due principally to the economical status and marital conditions of the larger percentage of the population of the city. The fresh milk supply for Colon amounts to less than 40 gallons per day, which is absolutely inadequate. The erection of a modern sanitary plant for the reconstruction of powdered milk is very greatly needed in this city. However, it seems the Panamanian authorities do not think so, for they have absolutely refused to allow the installation of such a plant in the city of Colon.

Street cleaning.—Most of the streets in Colon are in a very bad condition from lack of repairs. The concreting of these streets is a much-needed improvement and would greatly facilitate cleaning. It is recommended that a modern street-sweeping machine be purchased for the purpose of sweeping all paved streets in Colon and This would expedite the work and reduce the force

necessary to keep streets clean.

Fines imposed for violation of sanitary regulations during the calendar year numbered 453, amounting to \$984.

Antirat work, such as rat-proofing of buildings, elevation of bulky material and foodstuffs from the floor or the ground, thorough collection and disposal of garbage every 24 hours, and poisoning and trapping for the purpose of detecting any rodents that might be plague-infected, was carried on during the entire year. Barium carbonate mixed thoroughly with the other ingredients of bakers' bread and same baked into the ordinary loaf was found to be the most satisfactory method of using this poison.

This office found it necessary to employ a force of laborers to do concrete repair work for private parties in Colon. We collected

\$5,443.55 for such work during 1920.

### Veterinary work:

Quarantine inspections: Cattle.	29,159
Hogs.	10,876
Ante and post mortem inspection:	
Cattle.	30,771
Hogs.	10,731
Condemnations:	
Carcasses, cattle	35
Parts, cattle.	1,350
Colon. 150	
Cristobal 1,200	
Carcasses, hogs.	516
Colon. 162	
Cristobal : 354	
Hogs passed for sterilization.	141
nogs passed for sternization	141

A charge for inspection of 25 cents for cattle and 10 cents for hogs per head is made against the Colon abattoir. The collections for this work since this charge was authorized (August 10, 1920) amounted

to \$982.05.

Food inspection.—During the past 2 months one sanitary inspector was assigned to food inspection only. The results have been very gratifying as shown by the improvement in the general cleanliness and sanitary condition of bakeries, dairies, ice cream parlors, restaurants, hotels, messes, etc. The following establishments are now receiving regular and systematic inspection by the food inspector: 10 hotels, 37 restaurants, 3 messes, 18 bakeries, 5 bottling works, 8 markets, 48 vendors, 14 ice cream parlors and soft drink stands, 6 dairies.

Mount Hope district.—As conditions warrant, antimalarial work in Mount Hope district has been gradually extended; 30,242 linear yards of open drains were installed during the year. The installation of very narrow drains in low swampy areas is being tried out extensively in this district and they have proved very satisfactory.

The antimalarial work in the district has been effective this year, as is shown by the low malarial rate compared to former years. It is contemplated to install an extensive system of tile drains throughout the district during the next dry season in order to reduce the cost of maintenance of open drains.

#### DIVISION OF QUARANTINE.

(Surgeon S. B. GRUBBS, U. S. P. H. S., Chief Quarantine Officer, January 1, 1920, to October 27, 1920.)

(Surgeon W. C. RUCKER, U. S. P. H. S., Chief Quarantine Officer, October 28, 1920, to December 31, 1920.)

It has been the constant aim of the Chief Quarantine Officer to administer the quarantine regulations with the minimum inter-

ference with commerce and to reduce restrictions and delay of shipping to the lowest point compatible with reasonable safety to the health of the Republic of Panama and the Panama Canal, the personnel of vessels touching at Canal ports and of the countries to which they are destined. Communicable disease may be brought here from the entire globe, and without proper sanitary supervision, the Isthmus is capable of becoming a focus for the redistribution of disease to many far distant points; the prevention of this by maritime quarantine is a problem resolving itself into:

(a) Securing accurate first-hand knowledge of the sanitary con-

dition of ports dangerous to the Panama Canal.

(b) Stimulating the owners and operators of ships to prevent the

ingress of infected persons, animals, and things to their vessels.

(c) The routine inspection of vessels and their personnel at ports of arrival in the Canal Zone, the isolation of infected or potentially infected persons, the fumigation of infected ships, and the periodic fumigation of vessels for the destruction of rodent and insect carriers of disease.

In the application of these sanitary safeguards it has been constantly borne in mind that it is the living disease vector which is most to be feared and it is this danger, rather than the inanimate

disease carrier, which accordingly has been stressed.

In mid 1919, Doctor Grubbs, then Chief Quarantine Officer, was detailed to make a tour of inspection of the west coast of Central America. The ports visited were Punta Arenas, Costa Rica; San Juan del Sur and Corinto, Nicaragua; Amapala, La Union, and Acajutla, Salvador; and San Jose de Guatemala. Also the interior cities of Grenada, Managua, and Leon in Nicaragua were visited.

The objects of this trip were (1) to gain first-hand information of conditions, (2) to establish personal relations in order to obtain information by more direct means, (3) to stimulate preventive measures, especially regarding yellow fever, and (4) to modify our procedure at Balboa to correspond with actual conditions and

necessities.

All these objects have been accomplished in a very satisfactory manner. If the Canal authorities can stimulate neighboring countries to prevent such diseases as yellow fever and plague, they will be protecting themselves and will facilitate commerce to the benefit of the Canal and the world as a whole. Not only has a warning against plague been sounded but arrangements have been made, or are pending, that will do a great deal to prevent the recurrence of yellow fever in the future. In Corinto a permanent sanitary inspector will devote his entire time to stegomyia elimination. As long as this work is continued yellow fever will spread to a very limited extent, if at all, in Corinto.

As to changes in quarantine procedure: (1) La Union.—We formerly required vessels to leave the wharf at 5 p. m., otherwise they would be fumigated on arrival at Balboa. This restriction has been removed because there is no mosquito breeding on the wharf; if there were, it is doubtful if they could get aboard a vessel. The removal of this restriction is of more advantage to shipping than is at first apparent as, on account of a strong cross current, it is possible to dock only on a slack tide and a vessel moving out to anchor at night may not be able to get to the dock until noon the next day.

2. Corinto.—Vessels were required to anchor in the stream at night, and the fumigation of vessels before sailing has been required since last August. Both these restrictions have been removed for the same reasons that apply at La Union. Inspection of all of Corinto for mosquito breeding has been in progress for some time. (3). Punta Arenas.—Formerly our restrictions required that passengers who had stopped over night be quarantined; those who had been in the port during daylight only were not held. This restriction has now been removed for two reasons (1) Punta Arenas has had no yellow fever for several years nor have there been any known cases in Costa Rica and the mosquito conditions are not bad; (2) passengers can leave Punta Arenas for Cristobal via Limon against which no quarantine is maintained, and if connections are good arrive in 2 days and are not delayed.

Experiences during the past month have strengthened the belief that such inspection trips are of the greatest value and should become a fixed policy of the quarantine service. We must help our neighbors to keep free of quarantinable disease, and in our quarantine we have a means of bringing this about for their own and our good, for the ultimate aim of quarantine should be the abolition of disease and not walling ourselves in against outside dangers we take no steps

to abolish.

A similar tour of inspection was made of the western ports of South America. The following quotations from Doctor Grubbs' report indicate the results accomplished:

Observations are attached hereto in the form of notes on the ports visited. In addition, a trip was made to Quito to express to the President of Ecuador and other officials the interest and appreciation felt for the radical manner in which yellow fever has been eliminated from Guayaquil, to assure them that we are ready to promptly recognize such work by modifying our quarantine procedure

and to suggest that similar steps be taken against bubonic plague.

At Lima a similar call was made, at the suggestion of the American Ambassador, upon the President, to express our interest in the extensive sanitary campaign he has inaugurated in Peru and especially in the efficient work now being done in the

province of Piura.

As there is no yellow fever at Guayaquil, and the city is probably noninfectable at present, it is evident that the quarantine against persons from that port should be entirely removed so long as such conditions are maintained. This action will be the strongest possible incentive to have the present conditions maintained. As the minor ports of Ecuador were always infected from Guayaquil, their quarantine should similarly be lifted. The fumigation of all freight from Paita should be stopped as it is now arranged to have all lighters at that port fumigated whenever used for loading our ships, and for the fumigation of all dried hides, which are the only freight that may carry rats. As Paita is free from yellow fever and from stegomyia it will be proper to allow the quarantine officers, in their discretion, to count such time as may have been spent in Paita or Talara as against the quarantine period of passengers.

time as may have been spent in Paita or Talara as against the quarantine period of passengers.

All Ecuadorian ports have doubtless had yellow fever from time to time, but probably have none now. The infection undoubtedly has come in the past from Guayaquil, as quarantine has been enforced rigidly against foreign ports, but rarely against those of Ecuador. There is no quarantine physician except at Manta and here quarantine was in force against Paita and Buenaventura and enforced by keeping all vessels that had touched at these ports, no matter how many days before, in quarantine with all hands until 6 days from arrival had elapsed.

Guayaquil is a city of 94,000 inhabitants on the Guayas River. Site is for the most part flat and during the torrential rains that fall in the wet season (December to March) is partly under water. During the dry season of 8 months there is practically no rainfall and the city is dry except for some brackish marshes on the outskirts. Guayaquil was destroyed by fire in 1896 and when rebuilt was laid out with wide regular streets. Active work is now going on to put down concrete and asphalt paving. Unfortunately this is being done in places before sewers are put in. The houses are mostly wood, or wood frames with stucco covering. In the poorer in. The houses are mostly wood, or wood frames with stucco covering. In the poorer

parts they are of wooden frames with flattened bamboo sheathing. A few rat-proof concrete buildings are being constructed, but as cement costs 18 sucres (\$8.00)

proof concrete buildings are being constructed, but as cement costs 18 sucres (\$8.00) a barrel these are the exception.

Yellow fever has been endemic in Guayaquil for years and persisted in spite of several attempts at its suppression until the campaign instituted by the International Health Board. This was begun in November, 1918, and was successful, the last case being reported in June, 1919. Guayaquil is not only free from yellow fever now but is undoubtedly noninfectable.

Antistegomyia work has been done in a less intense form in the small towns near Guayaquil, especially along the Guayaquil and Quito Railroad from Duran (across the river from Guayaquil) to Huirara.

Bubonic plague is prevalent among the rats at Guayaquil. The last human case was reported last April. Considerable work is being done, probably as much as is possible under the circumstances, but this is directed as much against human cases.

possible under the circumstances, but this is directed as much against human cases

as to the elimination of the disease among rats.

The U.S. Public Health Service has for years maintained an officer at Guayaquil. Since the resignation of the last regular officer, an Ecuadorian graduate of an American medical college has been on duty. He issues the U. S. bill of health on board just before each vessel sails for a United States port. Before doing so he inspects the officers, crew, and passengers and fumigates (Clayton apparatus) the holds that

the omeers, clew, and passengers and runningates (clayton apparatus) the noise that have received freight, and the crew's quarters.

Paita, Peru: This is northernmost port of Peru touched by regular lines; 2,700 inhabitants. The bay is a mere indentation but is protected by a point so that it is almost always calm. Weather is moderate and bright. It practically never rains. Paita is the outlet for the important valleys of the Piura and Chira rivers. Its exports are almost entirely cotton, with some dry hides. Paita and the surrounding towns have had two severe outbreaks of yellow fever and plague within the past year. Yellow fever has almost disappeared following an antistegomyia campaign which is still in force. Plague is also improved but this is due more to the natural extinction of rats by the disease than to any human efforts. Extensive plans have been completed for the rebuilding of a sanitary and rat-proof Paita to follow the burning of the present town which is made largely of cane and mud, but delays have continued.

No. yellow fever has appeared south of the Province of Piura for many years but the entire coast may be considered plague-infected.\* The ports down to Callao are all open, usually quite rough, dry, and barren. Vessels all lie out one mile and

load by means of open lighters.

Callao (population 50,000) is the chief seaport of Peru and the port for the capi-Lima, 8 miles inland, with its suburbs is said to have 400,000 inhabitants. Yellow fever has not been reported in these cities for several years although there are many stegomyia, especially in summer. Our chief consideration is for plague, which is endemic. The health authorities are absolutely indifferent to this disease, make no efforts to catch rats or to change the form of construction even in new buildings. Callao is 4 days from Balboa by direct steamer.

The following memorandum was issued by the Chief Quarantine Officer, August 26, 1920:

"Memorandum for the Quarantine Officers, Cristobal and Balboa:

"The 6-day detention period for passengers in good health from Guayaquil and

other Equadorian ports, is no longer required.

"The Province of Piura, Peru, is under yellow fever quarantine, but the ports of Paita and Talara may be considered entirely safe from yellow fever in computing the 6-day quarantine period. You are authorized to take into account the time that passengers arriving at Balboa have spent in the city of Paita, or in Talara, or the oil field adjacent thereto. The above must be considered as a distinct concession and passengers must be prepared to present evidence that will satisfy you that they have complied with this requirement, or they must remain at the quarantine station to complete the 6-day period.

The object of this arrangement is to relieve those places where efficient anti-mosquito work is being maintained from quarantine restrictions, at the same time keeping such restrictions upon interior points where this work has not suffi-ciently advanced." s

<sup>&</sup>lt;sup>4</sup>In the last 5 months of 1920, 92 cases of human plague were reported from Guayaquil. (U. S. P. H. S. Reports.)

s Since January 1, 1921, an extensive prevalence of yellow fever has been reported in the Department of Lambayeque, south of the Province of Piura, probably existing for some time previously. At present a 6-day quarantine is enforced at Balboa against all ports north of Callao.

The Quarantine Officer of Cristobal was detailed to make an inspection of Buenaventura and Tumaco, Colombia, with a view to recommending what quarantine restrictions should be enforced against these ports. The following excerpts from that officer's report are self-explanatory:

Buenaventura: The rainfall is about 400 inches annually and is well distributed throughout the year. The tide enters the lower levels of the town, and with the rainfall, is an important factor in keeping the town in a habitable condition. I slept on shore but did not encounter any mosquitoes. The water containers are well screened. This is the port for Cali, Manizales, and other places. In my opinion, there has been no yellow fever here since 1915 and then the infection was probably introduced from Guayaquil.

It is recommended:
1. That the quarantine be lifted, provided that within 3 months an active anti-

mosquito campaign be underway.

2. That the Colombian Government finance this campaign and that the sanitary officers of the government direct the work.

officers of the government direct the work.

3. It is suggested that in carrying out the work, the sanitary officer secure the cooperation and assistance of Mr. Walsh, the American Consul.

4. That our attitude at the end of 3 months depend on the manner in which the above recommendations are carried out, as shown by reports from Mr. Walsh, and their compliance with suggestions offered by him.

Tumaco: This townis 537 miles from Balboa and is situated in the southwestern corner of Colombia. It has a population of 6,000 and is located on an island which is about 5 feet above sea level. The soil is sandy and no water remains after the rains, except that collected in screened tanks and barrels. The sanitary conditions are the best I have seen in any of the smaller towns of Latin America. There is no trace of quarantinable disease having occurred here for at least 15 years. It is earnestly recommended that the quarantine be lifted at once earnestly recommended that the quarantine be lifted at once.

Following the receipt of this report the following instructions were issued:

To the Quarantine Officers, Cristobal and Balboa:

1. The 6-day detention period for passengers in good health from Tumaco is no longer required.

2. The 6-day detention period for passengers in good health from Buenaventura is provisionally lifted.

During the year the general quarantine instructions have been entirely revised and amendments relative to night quarantine service have been promulgated. On February 5, 1920, the quarantine regu-

lations were extended to include influenza and similar diseases as maritime quarantinable diseases. The following instructions relative to vaccination have been ollowed throughout the year:

To Quarantine Officers: In order to facilitate travel and to avoid unnecessary vaccination of passengers who are amply protected against smallpox, quarantine officers are authorized to issue a certificate of vaccination which will be good for 5

omeers are authorized to issue a certificate of vaccination which will be good for 5 years after they have vaccinated an individual and have personally observed either (1) successful vaccination, (2) vaccinoid, or (3) immune reaction.

The following technique must be strictly followed: The part to be vaccinated (preferably deltoid insertion) should be washed with soap and water, if necessary, and in any case with alcohol. After vaccination it is advisable to expose the arm to the open air for 15 minutes before the clothing is allowed to touch it. No shield

vaccinate by one of the following methods:

1. Linear incision or abrasion. Use a sterile needle and with a single downward.

Use a sterile needle and with a single downward to the control of the contr stroke for each make three scratches, each 3-inch long, parallel to each other and to

the humerus, and 1 inch apart. Rub vaccine into two of these scratches, using a sterile toothpick, or other instrument. The third scratch will be used for a control.

2. Drill method. A sterile drill or dental chisel, about 2 millimeters wide may be used. With a twisting motion and moderately firm pressure make three small circular abrasions, I inch apart, two above and one below. Rub the virus into two of these obserview leaving the third for control. of these abrasions, leaving the third for control.

Direct patient to return for observation on the second and fifth day. When time is limited, 24 hours may be sufficient to observe reaction of immunity and when this is established certificate may be issued. After observation of the fifth day in those not previously vaccinated, it may be necessary to have them return on the seventh and later days.

The following reactions only are recognized:

1. Successful vaccination.—In previously unvaccinated persons or in those whose immunity has completely disappeared, there should be present on the fifth day a vesicle, linear or circular, surrounded by a narrow areola, which progresses to a typical take on about the tenth day.

2. Vaccinoid.—In those whose relative immunity is somewhat low, this milder form of vaccination exhibits itself on the fifth day as a smaller vesicle with a larger areola. The duration of the reaction is shorter and less severe.

3. Immune reaction.—Where the immunity of the individual is high, either from a previous vaccination or from an attack of smallpox, a subsequent attempt at vaccination results in a prompt, sharp reaction which reaches its maximum in about 48 hours and may entirely disappear within 4 days. At the site of the inoculation there is a small reddend papule linear or circular surrounded by a very

about 48 hours and may entirely disappear within 4 days. At the site of the inoculation there is a small reddened papule, linear or circular, surrounded by a very narrow areola. Itching is prominent.

Either of the foregoing reactions builds up or indicates immunity and warrants issuing a certificate good for 5 years. If none of these reactions occurs the result should be considered a failure and no certificate issued. Complete absence of re-

action means inert virus or faulty technique.

The above instructions do not prevent issuing of temporary certificates immediately after vaccinating to those who must leave at once, but these should not be given where a failure is observed unless applicant is revaccinated.

#### THE ECONOMICS OF MARITIME QUARANTINE.

Surgeon Grubbs made a study of the economics of maritime quarantine not only from the viewpoint of the indirect effect which the Canal quarantine exercises upon the health and therefore upon the commercial prosperity of ports from which shipping passes to the Canal, but also from the aspect of the actual saving which accrues directly to ships through the reduction of detentions to the lowest margin of safety. It is manifestly impracticable to arrive at an absolutely accurate figure which will represent the average tondetention-day loss of a ship in detention or an average passengerdetention-day loss for persons held in quarantine. The figure of 50 cents per ton-day for the former and \$5 per passenger-day loss were therefore arbitrarily assumed. For all practical purposes these figures are accurate enough and by applying them it becomes possible to estimate and compare the results obtained from year to year. Thus in 1918, there were 151,176 ton-detention-days and 38,169 passenger-detention-days with a total direct loss of \$267,935. In 1919 the loss was \$173,538 and in 1920 it was \$191,226. These figures show decreasing loss but unless the ratio of the loss to the total tonnage received is given the picture is not complete. In 1918 this loss was \$23.15 per thousand ton received; in 1919 it was \$12.02; and in 1920 it was \$8.64.

### This is set forth in the following table:

Year.	Total tons received.	Total ton- detention- days.	Total pas- senger-deten- tion days.	Total loss.	
1918	14,512,721	154,176 161,376 48,172	38,169 18,570 33,436	\$267,935 173,538 191,266	\$23.15 12.02 8.64

#### QUARANTINE TRANSACTIONS AT COLON AND CRISTOBAL DURING THE CAL-ENDAR YEAR 1920.

Vessels inspected and passed. Vessels detained in quarantine. Vessels given provisional pratique.	2,339 5 19
Total	
Number of days vessels were held in quarantine	6 1,575
For mosquitoes, SO <sup>2</sup>	18 7
For mosquitoes, SO <sup>2</sup> and Na Cn	$\begin{smallmatrix}6\\49\\2\end{smallmatrix}$
For rats, Na Cn	25
Total	107
Crew inspected on arrival. Passengers inspected on arrival. Crew passed on certificate of medical officer. Passengers passed on certificate of medical officer.	118,136 43,657
Total	216,225
Supplementary inspections of persons on detained vessels.  Persons detained in quarantine station.  Number of days held.	1,725

Immigration.—The inspection of immigrants has continued as in previous years.

### ANCON HOSPITAL.

### (Col. L. T. Hess, U. S. Army, Superintendent.)

Buildings and grounds.—A 2-story addition was built to the power-plant building; on the ground floor is the new carpenter shop, twice as large as the former one, and on the second floor are the electrical shop and miscellaneous stores of the electrician, carpenter, painter, and plumber. Following the change, the hospital bakery was transferred from the kitchen-mess hall building into the portion of the power-plant building formerly used as plumbing and carpenter shops, and the former bakeshop was occupied by the general mechanic as workshop and storeroom.

A storage and receiving room for the undertaker's department .

was built as an addition to the Board of Health Laboratory.

All chronic patients having been transferred to Corozal Hospital for the crippled and insane, the old frame building formerly occupied by these chronic cases was turned over to the Supply Department, razed, and reerected on one of their plantations.

The old morgue and the old carpenter shop were evacuated and

turned over to the Supply Department.

Considerable work has been done toward improving the grounds by grading, sodding, planting of trees, etc. One hundred orange trees, 50 grape fruit, and 25 avocado (alligator pear) trees have been set out. From trees already bearing on the hospital grounds the following amounts of fruits were gathered for use by the hospital:

Bananas (stalks)		Papayas Mangoes	28 <b>5</b> 7.841
Avocados	1,089	GuavasCoconuts.	2,385
Oranges		Sour sap	

The hospital recommenced bakery operations in December. Thirteen thousand one hundred and twelve pounds of bread were made from 9,429 pounds of flour, the net cost per pound of bread

being \$0.0654.

Motor transportation.—All cars were kept in good state of repair; all mechanical repairs, except emergency road repairs, are now made in the motor car house instead of in the hospital garage, by the employees of the motor car inspection department instead of by the local hospital chauffeur-foreman. This has resulted in increasing the operating cost of our transportation, without increasing the efficiency of the service in any respect. Certain of the transportation is requiring considerable repairs and will probably have to be replaced before long.

Operating expenses.	Cost of equipment.	Net running expenses.		Mileage.	
		1920.	1919.	1920.	1919.
Truck No. 282 Truck No. 1209 Hearse No. 305 Ambulance No. 301 Ambulance No. 303 Ambulance No. 307 Ambulance No. 307 Ambulance No. 308	833.21 1,412.74 632.50 604.02 658.41	\$1,170.56 1,199.80 707.33 1,320.42 2,021.02 1,975.33	\$1,090.67 617.02 580.09 1,347.05 182.88 1,048.76 1,649.94	6,700 7,258 1,248 6,917 7,834	7,591 3,452 1,605 7,597 770 5,405 8,035
Total	\$5,747.77	\$8,394.46	\$6,516.36	38,892	34,445

Surgical clinic.—During the year 1,655 major operations and 5,781 minor operations were performed. Two thousand eight hundred forty-three cases visited the out-patient department, for whom 408 prescriptions were written. Two hundred eighty-nine obstetrical cases were delivered.

Medical clinic.—There were 2,738 cases treated in the outpatient department, for whom 1,650 prescriptions were written.

Eye and ear clinic.—Cases visiting the out-patient department numbered 7,542 for whom 2,650 prescriptions were written. One thousand fifty-two refractions were made and 1,215 operations performed.

X-ray clinic.—There were 2,608 cases handled; 5,324 plates; 364 X-ray films; 1,533 dental films taken; 50 treatments given

Steward's department.—During the year 155,831 rations were issued to Ancon Hospital patients and 90,767 rations issued to personnel entitled to subsistence, a total of 246,598 rations; the net cost was \$114,189,55.

There were 36,897 rations issued to pay boarders, mostly nurses who are charged \$20 per month; the payments for these amounted to \$18,744.65.

# REPORT OF PATIENTS DAYS.

						D.111.01			
1920									296,946
									319,908
1917	• • • • • • • • •		• • • • • • • • •			• • • • • • • •	• • • • • • • • •		311,451
1910									270,294
COST	r of sui	BSISTEN	CE PER	PATIEN	T PER I	DAY (AN	CON HO	SPITAL	ONLY).
1920									\$0.463
									.3495
1918									.315
									.253
									.200
	MOVEMI	ENTS OF	PATIEN	NTS, NOI	NRESIDI	ENTS OF	CANAL	ZONE.	
	Total	number tr	eated.		Died.		Da	ys treated	l
	Ancon	Corozal, Hospital.	Total.	Ancon	Corozal Hospital.	Total.	Ancon	Corozal Hospital.	Total.
1917	274	76	350	7	3	10	5,101 7,667 15,434	21,396	26,497
1918 1919	510 883	76 56	586 939	9	10 3	19 22	7,667	20,431	28,089 31,779
1919	1,250	54	1,304	19 16	1	17	24,418	7,667   20,431   15,434   17,245   24,418   15,979	
1020	1,200	01	1,001	**	1	1	-1,110	10,000	40,397
	<i></i>								
							1	1	
					1920.	1919.	1918.	1917.	1916.
				- 17					
Chroni	c patients								
To	otál numbe	er treated.			33	34	38	63	52:
		er of days			9,626	9,710	8,603	9,836	9,174
Av	verage nun	nber of pa	tients per	day	\$0.315	\$0.2654	\$0.2602	\$0.2520	25
Moven	verage per nent of mi	capita cos litary pati	ents:		\$0.515	Φ0.200±	\$0.2002	00.2020	\$0.2400
To	otal number	er of admis	ssions		860	1,392	4,165	2,469	1,937
		er of days			15,134	22,217	49,067	33,494	28,519
		nber const	antly sick		41.35	60.90	134.49	91.76	78.13
Admiss		ospital			9,783	10,503	12,153	10,880	9,116
To	Corozal 1	Hospital			170	151	229	191	225
To	chronic	ward			7	8	13	45	26
To	o cripple fa	arm			12	17	39	54	59
	Totals	<b></b>			9,972	10,679	12,436	11,170	9,426
	Totals.		• • • • • • • • •			=====	====		
Deaths					0=0	0.40		0.00	00*
Ar	ncon Hosp	ital			$\frac{276}{32}$	343 43	336 73	368 30	325 57
Operat	ions:	pital			34	40	13	30	31
M	ajor surgio	cal operati	ons		1,655	1,688	1,784	1,684	1,465
M	inor surgio	cal operati	ons		5,781	5,813	4,424	1,775	1,333
- Ey	ye and ear	opertion	8		1,215	1,044	1,088	855	622
Re	erractions.	cases deliv	orod		1,052 289	1,263 314	1,312 321	1,108 301	$1,378 \\ 246$
Out-re	ostetricai o itient depa	artment.	ereu		209	014	021	001	240
To	otal visits				13,123	13,833	14,276	11,784	13,188
Pr	escription	s written.			4,708	5,424	4,230	3,798	6,289
Dispen	sary (dist	rict physic	ian), Anc	on:	105 171	102,034	92,201	142,290	120 210
To	otal treate	α			105,171	102,004	32,201	142,290	130,219

## FINANCIAL STATEMENT.

	1920.	1919.
Operating expenses	\$705,836.14	\$592,456.78
Gross cost per patient per day (Ancon Hospital only)	438,582.01	322,222.37 3.08166
Net cost per patient per day (Ancon Hospital only).  Operating expenses, Ancon Hospital	1.57536 592,691.54	1.65233 492,366.09
Revenue, Ancon Hospital	348,776.06	228,367.77
Operating expenses, Corozal Hospital	94,164.03 88,927.95	80,870.96 89,330.60
Operating expenses, dispensary	18,264.89 643.25	13,168.59 528.00

A more detailed statement of operations, etc., will be found in the

statistical tables at the end of this report.

Among the recommendations of the Superintendent of Ancon Hospital, to cover more or less pressing needs of the institution, are

the following:

1. Nearly all new hospital construction in the United States provides for hydro- and electro-therapeutic apparatus, the need for which in the tropics is greater than in the temperate zone. Residence in the tropics induces nervous conditions which are amenable to hydro- and electro-therapeusis and the establishment of such a service in Ancon Hospital is recommended. Room therefor could be provided with small expense, in the basement of Administration-Clinics Building, the equipment being the main item of expense.

2. The organization of a urological-skin service, now under the surgical service, will enable the hospital to care more satisfactorily for venereal and skin cases, which are not now, owing to the lack of a physician particularly qualified in genito-urinary work, receiving the attention they should. This proposed service can be taken care of on the third floor of the Administration-Clinics building, or in the pro-

posed out-patient clinics building recommended below.

3. An "out-patient clinics" building, of reinforced concrete in harmony with design of present hospital structures, on the site near the dispensary is recommended for the purpose of housing the medical, surgical, and genito-urinary out-clinics and pharmacy. The present location of those clinics in the Administration-Clinics building renders them very inconvenient of access to out-patients visiting them.

4. With completion of permanent hospital buildings, steps should be taken to provide permanent quarters for hospital staff and gold employees in accordance with proposed plans. At least two of these quarters buildings should be constructed each year until completion

of proposed layout.

5. A recreation hall, consisting of two large open pavilions of reinforced concrete in keeping with design of other hospital buildings, located on the hillside, is desirable for the use of convalescent patients. Such a building should be provided with covered passageways from the other sections of the hospital. The hillside should be terraced and set out in tropical plants and trees (mostly fruit

trees) and improved by walks, etc., to provide a suitable place for exercise of convalescent patients, especially those having tuberculosis, for whom no suitable means of out-door exercise is now

provided.

6. Provision should be made for a sanitorium at some suitable place within the Canal Zone for the treatment of tuberculosis, with a view to segregating this class of patients. Under present conditions, these cases are sent into Ancon Hospital, for segregation in the isolation section, which is not well adapted nor of sufficient size for their accommodation.

7. Two large tennis courts and a swimming pool should be constructed for the use of gold personnel in close proximity to the nurses' quarters. Some form of exercise is absolutely necessary in this climate to maintain hospital employees in the state of physical

fitness demanded by their duties.

8. The nurses' quarters at the present time do not provide sufficient quarters for the nursing staff; it has been necessary to double up in a few rooms, and for others to be quartered elsewhere. The nurses' home provides quarters for only 70 nurses, while 78 are on duty. Such congestion is not conducive to the best interests of the service, and provision should be made so that each nurse will

have a room.

9. Extension—Section B.—Build an addition (basement and two stories) to rear of service section. This addition is needed so that the private rooms in a portion of this section will have an outside corridor similar to that of the other private rooms. At present these rooms are not desirable for use of private patients on account of the sun shining directly into the rooms during the days when it shines and during inclement weather the windows have to be kept closed, which renders the rooms stuffy, and is a source of constant complaint from private pay patients. Also, such an addition would give more room for the diet kitchen which at present is entirely too small for proper and efficient service of patients' diets. Further, it would afford more commodious reception rooms on first and second floors for use of visitors and incoming and outgoing patients, and in the basement provide a checking room for proper care of patients' clothing and baggage.

10. Animal house.—There should be built, in the rear of the laboratory a separate, suitable building for an animal house. At present such animals as are used for experimental and diagnostic work at the Board of Health Laboratory are kept in rooms which are dark, and although kept as clean as possible, the odor therefrom is very objectional and permeates not only through the laboratory building itself, but also to the street. People walking the road in front of the laboratory get the odor and a great many inquiries are made as to whether the odors are due to decomposing bodies in the laboratory. Aside from these facts, in the present location the animal rooms are not a suitable place to keep animals in a healthy condition. They should be kept in a separate building, especially designed to give them sunlight, plenty of ventilation, etc., and also

to reduce to a minimum an insanitary nuisance.

11. Because of the difficulty in getting hot dry steam to all parts of the hospital and laboratory, due mainly to improper location of the steam plant, it is recommended the power plant be relocated

near the road back of the Board of Health Laboratory, about the present site of the attendants' quarters, and that a laundry be built in connection with the power plant, of sufficient capacity to handle the hospital linen. While the immediate expense may be considerable, with such a plant installed it would mean an immense saving

to the hospital over the present arrangement.

12. Considerable equipment requires replacements and additional items are needed; the most important ones are, beds, cribs, mattresses, pillows, blankets, desks and office equipment for clinic offices, file cases for file room, china and silverware for private rooms and white sections, bakeshop and kitchen equipment, to include ice cream freezer and apparatus for ice manufacture, a pipe-cutting machine, a new ambulance and a new body for hearse (the present body is practically rotted out and will not last very much longer).

### COROZAL HOSPITAL.

## (Dr. Louis Wender, Superintendent.)

Corozal Hospital, for the insane, is located at Corozal, 3 miles from Panama. The hospital wards occupy an area of about 5 acres and include 10 ward buildings for the insane. The management of this hospital also includes that of the farm of 150 acres, 30 cultivated and 120 pasture, on which the hospital is located. This institution operates a piggery and a dairy, furnishing milk for hospitals, and some for the small children in the Canal Zone and for adults on physicians' prescriptions. In addition, a home for cripples injured in the service of The Panama Canal is provided and operated under the hospital management.

### BUILDINGS.

There were no new buildings constructed at Corozal Hospital during this year, but a few alterations were made. The nurses' quarters were enlarged, making their rooms more spacious and adding two rooms, enabling us to accommodate our full organization of

female nurses and stewardess.

Ward "F," which has been utilized for the past year as an occupational ward for the male and female patients, was enlarged to accommodate more patients. This alteration was made in November at a cost of \$1,200, which will be reimbursed by the income from articles sold from the occupational ward; already \$500 has been turned in to be credited to this construction.

The feeding platform for the piggery has been surrounded by a concrete wall in order to make it more sanitary and prevent food from slopping off the platform, thus preventing flies breeding. The platform has also been resurfaced, the work being done by the patients.

A refrigerating machine has been installed in the dairy.

The kitchen and the second story porches and roofs and part of

the wards were painted during the year.

A new concrete coal bin has been built at the railroad station by the hospital help, to facilitate the handling of coal for the hospital and quarters.

### HOSPITAL DEPARTMENT.

There were 384 patients the first day of the year; 170 were admitted, 32 died, and 145 were discharged or transferred, leaving 377 remaining at the end of the year. We have endeavored to deport all those who could be sent back to their homes; the total deportations

for the year numbered 80 patients.

The occupational ward, which was established in the early part of 1919, has proven a great success. Nearly 40 patients are in this department making various articles, whereby they spend their time in a congenial manner which produces a beneficial effect upon their mental condition. Owing to the lack of accommodations, our occupational undertakings are scattered in various parts of the hospital grounds; however, we have succeeded in finding some sort of work to employ about 80 per cent of the female patients and 60 per cent of the males. An open, spacious, well-ventilated building where more patients could be brought during the day to be instructed, would increase the efficiency of the occupational therapy and benefit the patients to a greater extent. Over \$4,660 worth of produce was taken from the patients' garden and utilized for their own mess. Undertakings of this character do not entail any expense to the Health Department and yet are a material benefit to the patients themselves.

Broom-making machinery arrived recently and steps have been taken whereby some of the insane patients, and some of the chronics who were transferred from Ancon Hospital, will be induced to make brooms. Several chronics have already taken up this kind of work and are earning a little money in order to enable them to purchase

small luxuries and other articles.

The grounds in the hospital inclosure have been kept in order by patients detailed for that purpose.

#### FARM DEPARTMENT.

General.—The number of cripple employees has been reduced from 50 to 29, by obtaining employment more remunerative for them than their work on the farm warranted us in paying. This, with the reorganization of the farm, has reduced its running expense to a

great extent.

Dairy.—Our herd consists at present of 59 Jersey and 16 Holstein cows, 2 Jersey bulls, 1 Holstein bull, and 25 calves. With the regular arrival of feed from the United States and the pastures being in fairly good condition, we have been able to keep our regular supply of milk up to a good standard. Of the 25 Holsteins, which were imported from the United States in December, 1919, and immunized here against tick fever, 6 died as a result of the inoculation and 3 from other causes. The remaining 16 are doing well and we are at present milking 7 of them.

With the installation of the refrigerator, whereby the milk can be cooled by mechanical refrigeration, we are able to save on labor and ice approximately \$75 per month. Not only has this proven a success financially, but from a sanitary viewpoint, as the exposure and handling of the milk is reduced by one-third. We continue to pas-

teurize our milk after each milking as previously.

Piggery.—There was a total of 272 pigs on December 31, 1920. During the year we purchased barrows and 30 sows from the Supply Department. These sows were of native stock and in very poor condition, but after being fattened were bred and are raising quite a number of pigs. There was only one death among the young pigs from hog cholera, as all our pigs are immunized at regular intervals against this disease. We have endeavored to supply Ancon Hospital with all its pork, selling the surplus to the Cattle Industry.

Garden.—During the year a nursery was started in order to enable us to supply the Isthmus with various hedges and flowers. We have continued to raise vegetables, which are sold to the hospitals and the commissaries. The rose garden has been enlarged and we are able

to supply the demands for roses from time to time.

General remarks.—The general health of the patients, cripples, and chronics remains good. With the continued increase in the number of female patients, steps will have to be taken to construct a small ward to accommodate about 25 or 30 patients, due consideration being given to separate rooms for private patients, white Americans, and others who are willing to pay the extra cost, there being at present no suitable accommodations for the latter class of patients.

### COLON HOSPITAL.

(Maj. T. J. LEARY, U. S. Army, Superintendent.)

### HOSPITAL WORK.

The work is going along nicely. Many demands are made that the ordinary hospital is not called upon to meet, due to the fact that this institution combines an emergency hospital with a busy dispensary service. In addition to this work, quite a few calls are made by our physicians into the town and to ships in the harbor.

#### BUILDINGS.

These are very satisfactory. The painting of the hospital was finished during December and it now presents a neat and pleasing appearance. Ward "A" of the old hospital group has been given a slight overhauling, and is in condition to care for isolation cases coming to us for overnight, to be transferred to Ancon Hospital the following day. The most urgent need of the hospital is an up-to-date X-ray equipment. The X-ray operator could replace one of our present force, and it would be of still greater advantage if he were competent to do gas-oxygen anesthesia and apparatus for gasoxygen anesthesia were installed at the hospital. The addition of such equipment would be a great time and labor saver and would be more suitable for emergency work than ether anesthesia.

If any policy of expansion for Colon Hospital will be given consideration, it is believed the first addition to the present group should be a modern isolation wing. Colon will doubtless continue to grow rapidly in importance from year to year and in order to meet its growing requirements, the hospital facilities on this side should be expanded to the point of being able to hospitalize all of the sick from the Atlantic side. The principal objection to the present system is

the separation of the sick from their families and friends.

### SANTO TOMAS HOSPITAL (Panama).

(Maj. Edgar A. Bocock, U. S. Army, Superintendent.)

While Santo Tomas Hospital is not entirely under the jurisdiction of The Panama Canal it is, more or less, intimately associated with the Health Department by virtue of the agreement between the Republic of Panama and The Panama Canal, dated October 17,

1905, which reads as follows:
"The affairs of Santo Tomas Hospital will be administered by a Board of Directors of five members, three of whom will be appointed by the President of the Republic of Panama and two by the Governor of the Canal Zone. Of the three directors appointed by the President, one shall be the Treasurer of the Hospital, and one the Secretary of the Board. The Chief Health Officer of the Canal Zone, thereupon, will be the President of the Board of Directors. The Superintendent, two internes, and three graduate nurses shall be appointed by the Governor of the Canal Zone and their salaries paid from the funds of the Canal Commission."

Under the provision of this agreement, Santo Tomas Hospital has continued to operate under the joint administration mentioned and under the direct supervision of the Chief Health Officer of The

Panama Canal.

The year 1920 has been a particularly successful one for the hospital in many ways. The auditing and property accounting department, installed in 1919, has been perfected and enlarged with use, until it is now functioning efficiently and satisfactorily. All outstanding debts of the institution have been canceled and current monthly bills are now paid as soon as received. The revenues of the past year have amounted to \$245,414.96, while the actual operating expenses have been \$231,939.97, leaving a balance of \$13,474.99 available for use. An excess of approximately \$1,000 of revenues above expenses is now being shown monthly.

An effort has been made to improve the purchasing department of the hospital to the point where the best possible supplies and equipment can be obtained for the least expenditure of money. Waste and extravagance have been lessened and economy and

thrift in every department advocated and enforced.

The buildings, many of which are very old and practically falling down, have been repaired, repainted, and rendered habitable until the construction of the new Santo Tomas Hospital shall be completed. The usual routine of repairs of furniture and equipment by hospital artisans has been accomplished. All new furniture, wooden legs, crutches, coffins, etc., are manufactured in the carpenter shops. All beds and tables have been reenameled and electric and plumbing fixtures installed and repaired. In fact, all maintenance and upkeep work has been done by the hospital personnel, thereby saving an enormous expense.

Professional service.—All attention possible has been devoted to improving the professional service of the hospital and while it is still far from being ideal, it is undoubtedly advancing in efficiency. During the year, 14,584 patients have been treated; 155,593 days,

relief have been furnished, an average of 422 patients per day during the entire year. The average length of stay in hospital, for each patient was 10 days. Eight hundred fourteen deaths occurred in

During the year, 1,960 major operations and 2,721 minor operations were performed by the surgical service. Eight hundred seventyseven obstetrical cases were delivered. In the dental clinic, 4,756

treatments were given and 1,384 teeth extracted.

There were 8,421 cases treated by the medical service in the hospital, and 8,840 patients treated in the dispensary; 12,489 prescriptions were filled in the pharmacy of the hospital. The ambulance service which operates under this department made 1,946 calls, and the dispensary vaccinated 17,270 persons against smallpox.

During the year, 5,121 cases were examined and treated in the eye and ear clinic; 456 operations were performed; 11 refractions were made and 1,221 prescriptions furnished to patients.

A total of 1,248 cases was handled in the X-ray clinic. Three thousand one hundred twenty-six plates and 522 dental films were

used and 91 treatments administered.

Marked success has been attained by the venereal clinic. During the entire year, 2,512 new cases have been admitted, of which 1,825 were men and 687 women; 18,206 treatments and 1,548 consultations have been given; 1,682 injections of salvarsan, 2,120 injections of mercury and 598 operations have been done on clinic patients. The patients treated in this clinic have been relieved as follows: Six hundred twenty-seven cured, 374 discharged improved, 221 still under treatment, and the remainder left the clinic without authority from the doctor. Of the cases treated, 321 were diagnosed as syphilis and 746 as gonorrhea. Prophylactic treatment has been given to 3,046 men. Wassermann tests have been done on 4,187 persons and of this number 26.8 per cent have been positive. The revenue derived from the clinic amounted to about \$8,000. A vigorous campaign of advertising throughout the entire city has been kept up and excellent results secured therefrom.

During the year, 251,593 rations were issued and prepared by the steward's department for the patients and personnel of the hospital. Of this number 96,000 were for the personnel and 155,593 for patients. The average cost of each ration per person per day was \$0.317. The cost of hospitalization for each patient has amounted to \$1.515 per day, including subsistence. The total cost of operating this depart-

ment has been \$90,764.83.

### NEW HOSPITAL SANTO TOMAS.

The work of construction of the new Santo Tomas Hospital has been pushed energetically during the entire year of 1920. This enormous project was begun on November 15, 1919. All the grading and filling, consisting of approximately 92,000 cubic yards of earth and rock, has been completed and all municipal work, including streets, water and sewer lines, and electrical conduits have been installed. Materials in form of steel, lumber, and cement, have been acquired from the United States and placed on the hospital site. The plans of all of the buildings have been completed by the drafting department. Two

buildings, the isolation and tuberculosis sections, have been practically completed with the exception of the finishing work which will not be done until all the buildings are ready for completion.

## LEPER ASYLUM, PALO SECO.

(Mr. F. D. Tucker, Superintendent.)

During the year the asylum buildings were repainted, both exterior and interior, by the patients. Trees and hedges were set out, lawns marked out and graded, and gravel connecting walks put in. The task of altering the baths and toilets of the nine quarters buildings was completed; a ventilator was built on the office-commissary building; a vegetable storeroom and a carpenter shop was put in and the fronts of two quarters were changed, doing away with the long and dangerous front steps. A new panga was built. All repairs to buildings, furniture, plumbing, etc., were made by our own labor. Grass and bush cutting and sanitary work also were kept up.

Grass and bush cutting and sanitary work also were kept up.

One new building was completed by outside labor and occupied during the year, to be used as a detention ward for mental and unruly

cases among the patients.

Weekly moving picture exhibitions were given as usual; several dances were held and entertainments were given by some local talent, others by Girl Scouts, the Penn State Quartette, etc. National holidays were celebrated, and, thanks to the great generosity of friends on the Isthmus and in the States, our Christmas was a real one, with a tree, ice cream, cake, turkey, and presents. A small organ given by States' friends contributed greatly to the success of these times.

During the year 11 patients were admitted, 5 died, 2 were repatriated, 1 mental case was transferred to Corozal Hospital, and 6 cases, after exhaustive examinations, were discharged. Patient popula-

tion December 31, 1920, was 74.

A monthly average of 30 patients were employed, the payroll averaging \$193.21 per month. The value of products purchased from the patients for the asylum for the year was \$811.02. Total cash sales at the local store, operated by the asylum, amounted to

\$4,696.28.

The oral administration of chaulmoogra oil was continued this year with rather more willingness on the part of the patients, due to the fact that several cases were discharged in 1919 "apparently cured," or at least in whom there were no active lesions or bacteriological evidence of infection. A diagnostic board, consisting of the Chief of the Medical Clinic and the Chief of Laboratory of Ancon Hospital and the Assistant Chief Health Officer, which board passes on every case admitted to the asylum, met four times during the year to consider carefully those cases at the asylum whose improvement seemed to warrant their discharge. As a result of these examinations, six cases were discharged during 1920.

The Board of Health Laboratory is beginning to produce an ethyl ester of chaulmoogra oil; it is expected that in the near future there will be available for hypodermic use a sufficient amount of this derivative to enable the asylum to greatly obviate the discomfort

that is caused by administration of the oil by mouth.

On December 31, of our 74 patients, 62 (83.7 per cent) were taking chaulmoogra oil by mouth. As inability to tolerate the oil is given as their objection by practically all those not accepting the treatment, it is hoped that by the improved method of administration soon to be followed it will be possible to induce every one to be treated.

### BOARD OF HEALTH LABORATORY.

(Dr. L. B. Bates, Chief of Laboratory.)

(Operated in connection with Ancon Hospital.)

The work of the laboratory during the year has necessarily been largely routine. The following report has been prepared in the form of tables in so far as it was practicable to do so. The following paragraph is quoted from the rules of Ancon Hospital to show the amount

and variety of work now required of the laboratory:

"The Board of Health Laboratory is the official laboratory for Ancon Hospital, Colon Hospital, Corozal Hospital, the District Physicians, the Quarantine Stations, Palo Seco Leper Colony, Health Officers of Panama and Colon, the Coroner, the Veterinary Service of the Health Department, and the Colon Free Clinic for Venereal Diseases. It also serves as a Department Laboratory for the Panama Canal Department, U. S. Army, and for the Fifteenth Naval District, U. S. Navy, when so designated by those services."

In addition, considerable work has been done for other depart-

ments, private hospitals, and private physicians.

An epidemic of influenza started on the Canal Zone about the middle of March and commenced to wane in the middle of April. A bacteriological study of the cases was commenced early in the epidemic and the results reported before the Medical Association in May, at which time about 400 cases had been studied. Nasopharyngeal cultures, sputum cultures, blood cultures and cultures from autopsy material were made whenever possible. Subsequent work has not changed the conclusions which were drawn at the time from the study of these cases. The conclusions drawn were as follows:

1. No one organism has been predominant in our cases. A variety of organisms has been recovered from lesions which were apparently the same, the appearance of the lesion being no criterion as to the

organism present.

2. Streptococcus hemolyticus has been found in but small proportion of our cases and when found they were few in number and not widely distributed. We may safely say that the Streptococcus hemolyticus has played an unimportant part in this epidemic.

3. The influenza bacillus has been recovered from 15 per cent of the throats cultured during this epidemic; during an examination of 140

<sup>&</sup>lt;sup>6</sup> The paper is entitled "The Bacteriology of the Influenza Epidemic on the Canal Zone during March and April, 1920," by Dr. Lewis B. Bates, and Dr. J. H. St. John, and is being published in the 1920 Proceedings of the Medical Association of the Isthmian Canal Zone.)

throats in this hospital made in February, 1919, this organism was not recovered. The increase in positive cases seems to be about equally divided between influenza and noninfluenza patients.

4. The pneumonias in our fatal influenza cases seem to have been caused by a variety of organisms. In no instance were the lungs sterile and in most cases some of the organisms found in the upper respiratory tract were also found in the consolidated lung tissue.

5. Although diffident about offering any opinion on account of the incompleteness of our work we quote the following paragraph of Cummings<sup>7</sup> as stating our views at present: "The whole clinical and pathological picture becomes intelligible if we can postulate a primary etiological agent acting locally upon the respiratory surfaces and generally through its toxic products in such a manner as to prepare the way for invasion by the prevailing respiratory flora."

During the year the pathologist reviewed sinusitis, otitis media and mastoiditis in the 3,376 autopsies which had been performed by him at this laboratory. Much valuable data is collected in this paper and the 1920 number of the Proceedings previously referred to will

contain this article in full.

The entomologist prepared an article upon the Panama Canal species of the *Genus Anopheles*, bringing synonomy up to date, and treating particularly upon the taxonomy of the species and the collection and care of material for study. The article with 13 illustrations has been printed by the Health Department as a monograph, and will also appear in the Proceedings.

At various times throughout the year blood films showing malarial parasites, smears, cultures, intestinal parasites and ova and other laboratory specimens have been forwarded to medical schools

requesting them.

### BACTERIOLOGICAL REPORT.

Blood cultures:			
Total number of blood cultures	 	4	05
Positive blood cultures	 		73
Organisms recovered in blood cultures:			
B. typhosus (25 cases)	 		33
B. piratuphosus A	 		2
B. coli	 		2
Pneumococcus	 		15
Type I			
Type II			
Type III			
Type IV			
Streptococcus viridans			3
Streptococcus hemolyticus			6
Staphylococcus			12
Staphysicoccas	 		-~

Blood cultures made from 76 cases of influenza uncomplicated with pneumonia were all sterile; blood cultures made from 24 cases of influenza complicated with pneumonia were positive in 10 instances, the pneumococcus being recovered each time. (Type II, 2; Type III, 2; Type IV, 6.)

Blood cultures were not made routinely in cases of lobar pneumonia. Fifteen cases were cultured and the pneumococcus recovered 5 times.

(Type I, 3; Type III, 2.)

<sup>&</sup>lt;sup>7</sup> Studies of Influenza in Hospitals of the British Armies in France, 1918. Introduction by Col. S. L. Cummings, C. M. G., A. M. S.

### Dark field.

Dark field examinations of skin lesions	10
Number positive for Treponema pallidum	1
Number positive for Treponema pertenue	5
Dark field examinations of venereal ulcers.	142
Number positive for Treponema pallidum	25
Number positive for Treponema perfringens	2

Many of the ulcers were mere abrasions. Some were too old or had received enough treatment to render the finding of the *treponema pallidum* improbable. In typical cases of chancre two or more examinations were made when possible. Two of the positive cases included in the above had the positive lesion on parts other than the genital organs. The ulcer in one case was on the lip, in the other case on the umbilicus.

### Sputums.

Sputums from various sources were cultured for  $\overline{B}$ . influenzae and Pneumococcus, from August to December, inclusive, this work beginning three months after the subsidence of the influenza epidemic.

Number of sputums cultured.....

Spinal Fluid Cultures.         123           Total number of cultures (52 cases).         123           Positive cultures (18 cases).         34           B. influenzae.         1           B. influenzae and Staphylococcus albus.         1           B. influenzae and Streptococcus viridans.         1           M eningococcus (type normal).         1
Positive cultures (18 cases). 34
Positive cultures (18 cases). 34
B. influenzae. 1 B. influenzae and Staphylococcus albus 1 B. influenzae and Streptococcus viridans. 1 Meningococcus (type normal). 1
B. influenzae and Staphylococcus albus. 1 B. influenzae and Streptococcus viridans. 1 Meningococcus (type normal). 1
B. influenzae and Streptococcus viridans
Meningococcus (type normal)
D
Pneumonococcus4
(Type I, 1; Type II, 1; Type IV, 2.)
Staphylococcus aureus and Pneumonococcus (type IV)
Streptococcus viridans
Streptococcus hemolyticus
Stanhuloccus aureus. 4
Streptococcus hemolyticus and Staphylococcus aureus
B. tuberculosis
Autogenous vaccines prepared
Stools cultured for typhoid-dysentery group. 1,057 Urines cultured for typhoid group 551
Urines cultured for typhoid group. 551 Urines cultured for other organisms. 303
Urines cultured for other organisms
Miks: Corozal Hospital dairy
Mindi dairy. 245
Panama dairies (through Health Officer, Panama). 738
Commissaries 2
Condensed 11
Panama ice cream (through Health Officer, Panama)
Colon dairies (through Health Officer, Colon)
Colon ice cream (through Health Officer, Colon).
Commissary ice cream
Powdered milk. 1
Miscellaneous 5
Naso-pharyngeal cultures. 551
Sputum cultures
Throat cultures (Positive for B. diphtheriae, 66 cases, 190)
Throat cultures (other organisms than B. diphtheriae)
Plaques in buccal cavity. 51
Membrane from throat
Ear cultures 81
Eve cultures 17
Ear casts
3.0

Mastoid cultures.	4
Pus from chest	2
Pus from abscess.	1
Pleural fluid cultures	13
Acitic fluid cultures	3
Fluid from knee joint	3
Fluid from gall bladder	2
Gland cultures	9
Conjunctival cultures	2
Phenol coefficient test of salvarsan and neosalvarsan	2
Phenol coefficient test of hycol.	1
Autopsies cultured (heart's blood, organs, exudates, etc, 537)	184
Source not given	1
Vaccination scab	1
Root of tooth	1
Maxillary sinus	_ 1
Throat smears	95
Sputums examined for B. tuberculosis	143
Urines examined for B. tuberculosis	6
Vaginal smears	150
Urethral smears	103
Conjunctival smears	122
Skin lesions	3
Lesion on forearm	1
Dermatitis of fingers	1
Blood for embryo of filaria hominis	1
Coagulation time of blood	1
Test of typhoid vaccine	1
Examination of tropical ulcer	1
Can of oysters	1
Can of asparagus tips	1
Water cultures	3
Flour cultures	5
Meat from sandwich	1
Fish for culture and bacteriological count	1
Bacteriological report (animals).	
Cattle ears (195 positive for B. anthracis)	317
Hide cultured for B. anthracis	2
Horse ears	3
Hog ears.	1
Rat glands	4
Gland culture	1
Culture from cow.	î
Blood cultures:	33
Autopsies cultured	89
Horse's hoof cultured	1
Urine cultured	1
Stool cultured	3
Skin scrapings from horse	1

Bacillus typhosus was recovered in blood culture from 25 individuals; 12 of these cases were from shipboard and 13 from the Canal Zone or the Republic of Panama. The two cases from which Bacillus paratyphosus A. were recovered were from shipboard; the two ships

coming from Chile and Peru, respectively.

Typhoid carriers.—On December 31, 1919, two typhoid carriers, were under sanitary surveillance. One of these, a white American woman, has since returned to her home in the United States. The other, a colored laborer, is still a carrier and is still parolled under sanitary surveillance. Two additional carriers were detected during the year; one was a white American soldier who has since been transferred to the Walter Reed General Hospital, the other a colored woman who was and still is an inmate of the Corozal Hospital for the Insane.

Survey for meningococcus carriers.—A case of Meningococcus meningitis developed in Co. B, M. P., Fort de Lesseps, C. Z., October 8, 1920, a survey for the detection of carriers was undertaken.

Number swabbed. 67 Number positive. 7

Types of Meningococcus recovered.—Normal, 3; intermediate, 3; para, 1. Subsequent swabbing of these patients proved them to be but temporary carriers of the Meningococcus. The meningitis patient referred to above became a chronic carrier of the meningococcus and at this date is still held in isolation.

Leprosy.

Number of examinations made for leprosy. 76
Number positive for B. leprae (new cases). 18

(In addition, three old cases reexamined were positive.)

Photographs are now taken at the laboratory of all cases of leprosy as soon as a diagnosis is made. These are taken for purposes of record, also for purposes of comparison at a later date to show results obtained after a course of chaulmoogra esters or other treatment.

Anaerobic bacilli.—Anærobic bacilli of the gas gangrene group

were recovered from two cases of human gas gangrene.

During the year 13,566 Wassermann tests were performed on 9,234 persons. The results of these tests are summarized in the following tables:

## Wassermann Reactions during the Year 1920.

# (Based on the number of individuals examined and not on the number of tests made.)

	Positive.	Negative.	Total.	Per cent positive.
White, civil:	200	1.010	0.100	0.00
MalesFemales	209 13	1,919	2,128 217	9.82 5.99
White, soldiers, males	108	1,150	1,258	8.58
Total	330	3,273	3,603	9.15
Spanish and white natives.				
Males	117	607	724	16.16
Females	24	194	218	11.00
Total	141	801	942	14.19
Blacks and mulattoes:				
Males	770	2,458	3,228	23.85
Females	'334	1,106	1,440	23.19
Total	1,104	3,564	4,668	23.65
Chinese, males and females	7	14	21	33.33
Grand total	1,582	7,652	9,234	17.13

In addition Wassermann tests were made on 358 spinal fluids from as many individuals, and of these, 72, or 20.11 per cent, were positive.

### PATHOLOGICAL.

During the year 334 autopsies were performed at the Board of Health Laboratory. The causes of death were as follows:

## General diseases.

Malarial fever, estivoautumnal.	2
Scarlet fever	î
Influenza	32
Dysentery, entamebic	1
Dysentery, bacillary	4
Leprosy	2
Hemoglobinuric fever, unqualified.	1
Pyemia	2
Septicemia	3
Pyemia and septicemia, pneumonococcus.	1
Tyenna and septicema, pheumonococcus	2
Tetanus	2
Pellagra	.2
Tuberculosis of the lungs	17
Acute miliary tuberculosis	9
Tuberculous meningitis	2
Abdominal tuberculosis	1
Pott's disease	2
Tuberculosis of bones and joints.	ĩ
Disseminated tuberculosis	23
Syphilis, tertiary	2
Syphilis, cerebrospinal	3
Syphilis, hereditary	2
Cancer of the stomach and liver (esophagus)	1
Cancer of the breast	1
Cancer of other organs.	4
Anemia, secondary, cause not determined	î
Purpura hemorrhagica	i
1 drpdra nemorrnagica	
Total	123
Diseases of the nervous system and of the organs of the special sense.	
Diseases of the nervous system and of the organs of the special sen-	
Diseases of the nervous system and of the organs of the special sense	ses.
Diseases of the nervous system and of the organs of the special sense.  Encephalitis	ses. 2 4
Diseases of the nervous system and of the organs of the special sense Encephalitis	ses.
Diseases of the nervous system and of the organs of the special sense.  Encephalitis	ses. 2 4 4 1
Diseases of the nervous system and of the organs of the special sense simple meningitis. Pneumonococcus meningitis. Myelitis. Cerebral hemorrhage, apoplexy.	ses. 2 4 4 1 6
Diseases of the nervous system and of the organs of the special sense in	ses. 2 4 4 1 6
Diseases of the nervous system and of the organs of the special sense implementation.  Simple meningitis. Pneumonococcus meningitis. Myelitis. Cerebral hemorrhage, apoplexy. Softening of the brain. General paralysis of the insane.	ses.  2 4 4 1 6 2 8
Diseases of the nervous system and of the organs of the special sense Encephalitis. Simple meningitis. Pneumonoecocus meningitis. Myelitis. Cerebral hemorrhage, apoplexy. Softening of the brain. General paralysis of the insane. Dementia precox.	ses.  2 4 4 1 6 2 8 1
Diseases of the nervous system and of the organs of the special sense implementation.  Simple meningitis. Pneumonococcus meningitis. Myelitis. Cerebral hemorrhage, apoplexy. Softening of the brain. General paralysis of the insane.	ses.  2 4 4 1 6 2 8
Diseases of the nervous system and of the organs of the special sense simple meningitis. Pneumonoeoecus meningitis. Myelitis. Cerebral hemorrhage, apoplexy. Softening of the brain. General paralysis of the insane. Dementia precox. Disease of the ears.	ses.  2 4 4 1 6 2 8 1 2
Diseases of the nervous system and of the organs of the special sense Encephalitis. Simple meningitis. Pneumonoecocus meningitis. Myelitis. Cerebral hemorrhage, apoplexy. Softening of the brain. General paralysis of the insane. Dementia precox.	ses.  2 4 4 1 6 2 8 1
Diseases of the nervous system and of the organs of the special sense simple meningitis. Pneumonoeoecus meningitis. Myelitis. Cerebral hemorrhage, apoplexy. Softening of the brain. General paralysis of the insane. Dementia precox. Disease of the ears.	ses.  2 4 4 1 6 2 8 1 2
Diseases of the nervous system and of the organs of the special sense simple meningitis. Simple meningitis. Pneumonococcus meningitis. Myelitis. Cerebral hemorrhage, apoplexy. Softening of the brain. General paralysis of the insane. Dementia precox. Disease of the ears.	ses.  2 4 4 1 6 2 8 1 2
Diseases of the nervous system and of the organs of the special sense simple meningitis. Pneumonoeoecus meningitis. Myelitis. Cerebral hemorrhage, apoplexy. Softening of the brain. General paralysis of the insane. Dementia precox. Disease of the ears.	ses.  2 4 4 1 6 2 8 1 2
Diseases of the nervous system and of the organs of the special sense simple meningitis. Simple meningitis. Pneumonococcus meningitis. Myelitis. Cerebral hemorrhage, apoplexy. Softening of the brain. General paralysis of the insane. Dementia precox. Disease of the ears.	2 4 4 1 6 2 8 1 2 30
Diseases of the nervous system and of the organs of the special sense simple meningitis.  Pneumonococcus meningitis.  Myelitis.  Cerebral hemorrhage, apoplexy.  Softening of the brain.  General paralysis of the insane.  Dementia precox.  Disease of the ears.  Total.  Diseases of the circulatory system.	ses.  2 4 4 1 6 2 8 1 2
Diseases of the nervous system and of the organs of the special sense simple meningitis. Simple meningitis. Pneumonococcus meningitis. Myelitis. Cerebral hemorrhage, apoplexy. Softening of the brain. General paralysis of the insane. Dementia precox. Disease of the ears.  Total.  Diseases of the circulatory system. Pericarditis.	2 4 4 1 6 2 8 1 2 30
Diseases of the nervous system and of the organs of the special sense imple meningitis. Simple meningitis. Pneumonoeoccus meningitis. Myelitis. Cerebral hemorrhage, apoplexy. Softening of the brain. General paralysis of the insane. Dementia precox. Disease of the ears. Total.  Diseases of the circulatory system.  Pericarditis. Malignant endocarditis.	ses.  2 4 4 1 6 2 8 1 2 30
Diseases of the nervous system and of the organs of the special sense Encephalitis.  Simple meningitis. Pneumonococcus meningitis. Malgitis. Cerebral hemorrhage, apoplexy. Softening of the brain. General paralysis of the insane. Dementia precox. Disease of the ears.  Total.  Diseases of the circulatory system.  Pericarditis. Malgnant endocarditis. Organic disease of the heart.	ses.  2 4 4 1 6 2 8 1 2 30
Diseases of the nervous system and of the organs of the special sense simple meningitis.  Simple meningitis. Pneumonococcus meningitis. Myelitis. Cerebral hemorrhage, apoplexy. Softening of the brain. General paralysis of the insane. Dementia precox. Disease of the ears.  Total.  Diseases of the circulatory system.  Pericarditis. Malignant endocarditis. Organic disease of the heart. Angina pectoris.	5es.  2 4 4 1 6 2 8 1 2 30
Diseases of the nervous system and of the organs of the special sense simple meningitis.  Pneumonococcus meningitis.  Myelitis.  Cerebral hemorrhage, apoplexy.  Softening of the brain.  General paralysis of the insane.  Dementia precox.  Disease of the ears.  Total.  Diseases of the circulatory system.  Pericarditis.  Malignant endocarditis.  Organic disease of the heart.  Angina pectoris.  Aneurysm.	ses,  2 4 4 1 6 2 8 1 2 30
Diseases of the nervous system and of the organs of the special sense simple meningitis.  Simple meningitis. Pneumonococcus meningitis. Myelitis. Cerebral hemorrhage, apoplexy. Softening of the brain. General paralysis of the insane. Dementia precox. Disease of the ears.  Total.  Diseases of the circulatory system.  Pericarditis. Malignant endocarditis. Organic disease of the heart. Angina pectoris. Angina pectoris. Angina petotris. Angina petotris. Angina petotris. Angina petotris. Angina petotris. Andina petotris. Angina petotris. Andina petotris. Anterioselerosis.	ses,  2 4 4 1 6 2 8 8 1 2 30  1 4 10 1 1 1 2
Diseases of the nervous system and of the organs of the special sense simple meningitis.  Pneumonoeoccus meningitis.  Myelitis.  Cerebral hemorrhage, apoplexy.  Softening of the brain.  General paralysis of the insane.  Dementia precox.  Disease of the ears.  Total.  Diseases of the circulatory system.  Pericarditis.  Malignant endocarditis.  Organic disease of the heart.  Angina pectoris.  Aneurysm.  Arterioselerosis.  Embolism and thrombosis.	5es.  2 4 1 6 2 8 1 2 30
Diseases of the nervous system and of the organs of the special sense simple meningitis.  Simple meningitis. Pneumonococcus meningitis. Myelitis. Cerebral hemorrhage, apoplexy. Softening of the brain. General paralysis of the insane. Dementia precox. Disease of the ears.  Total.  Diseases of the circulatory system.  Pericarditis. Malignant endocarditis. Organic disease of the heart. Angina pectoris. Angina pectoris. Angina petotris. Angina petotris. Angina petotris. Angina petotris. Angina petotris. Andina petotris. Angina petotris. Andina petotris. Anterioselerosis.	ses,  2 4 4 1 6 2 8 8 1 2 30  1 4 10 1 1 1 2
Diseases of the nervous system and of the organs of the special sense simple meningitis.  Pneumonoeoccus meningitis.  Myelitis.  Cerebral hemorrhage, apoplexy.  Softening of the brain.  General paralysis of the insane.  Dementia precox.  Disease of the ears.  Total.  Diseases of the circulatory system.  Pericarditis.  Malignant endocarditis.  Organic disease of the heart.  Angina pectoris.  Aneurysm.  Arterioselerosis.  Embolism and thrombosis.	5es.  2 4 1 6 2 8 1 2 30

# Diseases of the respiratory system. Broncho-pneumonia Lobar pneumonia Gangrene of the lungs. 3 11 1 15 Diseases of the digestive system. Follicular tonsillitis..... Acute appendicitis..... Intestinal obstruction..... Biliary calculi.... Nonvenereal diseases of the genito-urinary system and annexa. Chronic nephritis. Pyo-nephritis and pyelitis. Hypertrophy of the prostate gland. 11 Salpingo-oophoritis..... Total..... 16 The puerperal state. Accidents of pregnancy Puerperal albuminuria and convulsions. Diseases of the skin and cellular tissue. Phlegmon and cellulitis..... Diseases of the bones of the organs of locomotion. Diseases of the bones and joints (tuberculosis excepted)..... Malformations. Congenital malformations (stillbirth not included)..... Diseases of early infancy. Premature birth..... Malnutrition..... Malnutrition. Other diseases peculiar to early infancy. 36 Affections produced by external causes. Suicide by firearms. Acute poisonings (food excepted)..... Burns (conflagration excepted)..... Accidental drowning Traumatism by a fall Traumatism by machines..... Traumatism by railroad crushing. Traumatism by other crushings. Lightning..... Electricity (lightning excepted) Homicide by firearms. Homicide by cutting instrument..... Homicide by other means..... Other forms of external violence. Legal execution by hanging.

# Ill-defined diseases.

Ill-defined organic disease. Infection of undetermined origin.	2
Total	3
Stillbirths and nonviable fetus.	
Stillbirths (at or near full term). Nonviable fetus	23 13
Total	36
Grand total.	334

# The most frequent causes of death listed for the year were:

	Cases.	Per cent.
Puberculosis	55	16.
Influenza	29	9.8 8.0
Malnutrition Diseases of the heart	25 16	7, 4 4.
Acute respiratory diseases Nephritis, chronic	15	4.4
Congenital malformations.		2.

# Table showing the more common causes of death at autopsy in the Board of Health Laboratory.

Date.	Number of autopsies per year.	Pneumonia.	Tuberculosis.	Hemoglobinuric fever, malaria.	Affections produced by external causes.	Chronic nephritis.	Combined types of dysentery.	Organic heart disease.	Typhoid.	Diarrhea and enteri- tis (in children).	Cancer,
1904 1905 1906 1907 1908 1909 1910 1911 1912 1913 1914 1915 1916 1917 1918 1919 1919	6 269 509 496 361 295 451 508 425 460 375 328 328 323 330 253 324 334	1 60 191 156 59 55 50 83 53 47 36 28 22 24 38 22 8	1 9 22 35 63 37 91 102 79 89 78 56 81 51 68 55	27 50 27 46 26 52 41 23 21 6 14 8 5 6	3 24 40 26 32 30 38 37 34 38 20 17 21 6 15	8 23 27 25 31 37 36 27 26 12 12 20 23 12 14	5 39 36 23 11 36 19 15 8 6 5 7 3	3 15 12 11 17 16 20 22 26 27 14 10 18 8 20	9 33 58 14 11 10 9 6 5 5 2 6 1	4  1 6 11 7 23 14 15 9 3 1 10	2 4 4 7 5 4 11 11 12 3 10 7 5 5 11 6
Total	6,047	974	972	355	410	344	221	255	172	104	105-

<sup>8</sup> This includes 32 cases of influenza.

Table showing number of autopsies performed revealing the following diseases per year.

Date	Autopsies performed per year.	Yellow fever.	Beriberi.	Ankylostomiasis.	Tetanus.	Infectious diseases of children.	Plague.	Smallpox.
1904 1905 1906	6 269 509	12 1	7 5	7 4	2		1	
1907 1908 1909	496 361 295	 2	1	4 2 2	1 3		1	
1910 1911 1912	451 508 425	2	1	1	1	4	1	
913 914 915	460 375 328	3	1 1	2	3 4 2	1 2 1		
916. 917. 918	323 330 253		7	 2	<u>i</u>	3 2 3		
1919	324 334	2				3 9 1		
Total	6,047	23	26	20	18	20	3	

<sup>9</sup> Scarlet fever.

Four hundred seventy-three bodies passed through the laboratory during the year 1920; of these 9 had been autopsied at Colon Hospital, of the remaining 464, 334, or 71.9 per cent, were autopsied at this laboratory, 28.1 per cent were not autopsied.

# MALARIAL CARRIERS FOUND AT AUTOPSY (EXCLUDING 2 CASES DYING OF MALARIA).

Cases.	Ca	ses.
January     4       February     1       March     3       April     3       May     1	August September October November December	2 2 5
June       6         July       2	Total	35

Three hundred thirty-four autopsies minus 2 deaths from malaria show 35 out of 332 autopsies revealing pigment and parasites in scant manner in rib marrow and spleen films or a per cent of 10.5.

Their local residences were as follows:

Colon. Gatun. Chagres River village. Culches	1	Balboa Panama City (suburbs) Cattle Industry pastures	1 4 8
Culebra Corozal	1	Peruvian sailor	1
COLO231	o o	rort Clayton	

# Microscopic examinations and reports on surgical specimens.

Tonsils (pairs)	2
Tonsils (pairs). 262 Tonsils (pairs) and adenoids. 172	2
Adenoids	1
Specimens from eyes and eyelids	2
Specimens from nose (nares)	3
Specimens from nose (cutaneous)	
Specimens from external auditory canals.	9
Specimens from skin of face (nose excepted)	5
Specimens from oral cavity (tonsils and adenoids excepted)	
Specimens from skin of back Specimens from skin of buttocks.	5
Specimens from skin of buttocks.	2
Specimens from skin of external genitaha	1
Specimens from perineum and anus.	6
Specimens from skin of upper extremities.	3
Specimens from skin of lower extremities.	7
	3
Appendix	4
	6
Specimens from rectum.	
Specimens from stomach.	2
	2
Carotid body	
Thyroid gland 15	3
Specimen from brain.	1
	2
Uterus and appendages	1
Cervix uteri	
Tubes and ovaries 42	
Specimens passed from or taken from uterine cavity	
Spermatic cord	2
Epididymis	4
Testes	5 2 2 4
Kidneys.	2
Bladder, specimens from	2
Prostate glands.	4
Mammary glands	2
Mammary glands. 1: Gall bladder. :	2 7
Mammary glands. 1: Gall bladder. 0mentum, specimens from 0mentum, specimens from 0mentum of the 0mentum of the from 0mentum of the 0mentum of	2 7 3
Mammary glands. 1 Gall bladder Omentum, specimens from Muscles, specimens from .	2 7 3
Mammary glands. 1: Gall bladder. 0 Omentum, specimens from. 1 Muscles, specimens from. 1 Tendons, specimens from. 1	2 7 3 1
Mammary glands. 1: Gall bladder. 0 mentum, specimens from. Muscles, specimens from. 1 Tendons, specimens from. Amputated lower extremities. 1	2 7 3 1 4
Mammary glands. 1: Gall bladder. 0 mentum, specimens from. Muscles, specimens from. 1 Tendons, specimens from. Amputated lower extremities. 1	2 7 3 1 4
Mammary glands. 1: Gall bladder. 0 mentum, specimens from. Muscles, specimens from. 1 Tendons, specimens from. Amputated lower extremities. 1	2 7 3 1 4 1
Mammary glands. 1: Gall bladder. 0 mentum, specimens from. Muscles, specimens from. 1 Tendons, specimens from. Amputated lower extremities. 1	2 7 3 1 4 1 1 2
Mammary glands.  Gall bladder.  Omentum, specimens from.  Muscles, specimens from.  Tendons, specimens from.  Amputated lower extremities.  Amputated upper extremities.  Nerve, ulnar.  Joints, specimens from.  Bones, specimens from.	1 1 2 3
Mammary glands	1 1 2 3
Mammary glands         1           Gall bladder         0           Omentum, specimens from         Muscles, specimens from           Tendons, specimens from         Amputated lower extremities           Amputated upper extremities         Amputated upper extremities           Nerve, ulnar         Joints, specimens from           Bones, specimens from         Artery, aneurysm of           Lymph nodes, cervical         In	1 2 3 1 6
Mammary glands	1 1 2 3 1 6 1
Mammary glands Gall bladder Omentum, specimens from Muscles, specimens from Tendons, specimens from Amputated lower extremities Amputated upper extremities Nerve, ulnar Joints, specimens from Bones, specimens from Bones, specimens from Lymph nodes, cervical Lymph nodes, supraclavicular Lymph nodes, supraclavicular Lymph nodes, submaxillary.	1 1 2 3 1 6 1
Mammary glands         1           Gall bladder.         0           Omentum, specimens from.         1           Tendons, specimens from.         1           Tendons, specimens from.         2           Amputated lower extremities.         3           Nerve, ulnar.         1           Joints, specimens from.         3           Bones, specimens from.         3           Artery, aneurysm of.         4           Lymph nodes, cervical.         1           Lymph nodes, supraclavicular.         1           Lymph nodes, submaxillary.         1           Lymph nodes, axillary.         1	1 1 2 3 1 6 1
Mammary glands         1           Gall bladder.         0           Omentum, specimens from.         1           Tendons, specimens from.         1           Tendons, specimens from.         2           Amputated lower extremities.         3           Nerve, ulnar.         1           Joints, specimens from.         3           Bones, specimens from.         3           Artery, aneurysm of.         4           Lymph nodes, cervical.         1           Lymph nodes, supraclavicular.         1           Lymph nodes, submaxillary.         1           Lymph nodes, axillary.         1	1 1 2 3 1 6 1
Mammary glands.  Gall bladder.  Omentum, specimens from.  Muscles, specimens from.  Tendons, specimens from.  Amputated lower extremities.  Amputated upper extremities.  Nerve, ulnar.  Joints, specimens from  Bones, specimens from.  Artery, aneurysm of.  Lymph nodes, cervical  Lymph nodes, subraclavicular.  Lymph nodes, subraclavicular.  Lymph nodes, subraclavicular.  Lymph nodes, subraclavicular.  Lymph nodes, expirochlear  Lymph nodes, spitrochlear  Lymph nodes, inguinal and femoral.	1 1 2 3 1 6 1 1 4 3 7
Mammary glands Gall bladder. Omentum, specimens from. Muscles, specimens from. Muscles, specimens from. Tendons, specimens from. Amputated lower extremities. Amputated upper extremities. Nerve, ulnar. Joints, specimens from Bones, specimens from. Artery, aneurysm of. Lymph nodes, supraclavicular. Lymph nodes, supraclavicular. Lymph nodes, submaxillary. Lymph nodes, axillary. Lymph nodes, pitrochlear Lymph nodes, inquinal and femoral Lymph nodes, retroperitoneal	1 1 2 3 1 6 1 1 4 3 7 1
Mammary glands         1           Gall bladder         0           Omentum, specimens from         Muscles, specimens from           Tendons, specimens from         Amputated lower extremities           Amputated upper extremities         Nerve, ulnar           Joints, specimens from         Joints, specimens from           Bones, specimens from         Artery, aneurysm of           Lymph nodes, servical         In           Lymph nodes, submaxillary         Lymph nodes, submaxillary           Lymph nodes, suillary         Lymph nodes, inguinal and femoral           Lymph nodes, retroperitoneal         Lymph nodes, mose, appendiceal	1123161143711
Mammary glands.  Gall bladder.  Omentum, specimens from.  Muscles, specimens from.  Tendons, specimens from.  Amputated lower extremities.  Amputated upper extremities.  Nerve, ulnar.  Joints, specimens from.  Bones, specimens from.  Artery, aneurysm of.  Lymph nodes, supraclavicular.  Lymph nodes, supraclavicular.  Lymph nodes, submaxillary.  Lymph nodes, axillary.  Lymph nodes, neguriar.  Lymph nodes, pitrochlear  Lymph nodes, retroperitoneal  Lymph nodes, retroperitoneal  Lymph nodes, retroperitoneal  Lymph nodes, nesso-appendiceal  Lymph nodes, location unknown.	11231611437111
Mammary glands         1           Gall bladder         0           Omentum, specimens from         Muscles, specimens from           Tendons, specimens from         Amputated lower extremities           Amputated upper extremities         Nerve, ulnar           Joints, specimens from         Joints, specimens from           Bones, specimens from         Artery, aneurysm of           Lymph nodes, servical         In           Lymph nodes, submaxillary         Lymph nodes, submaxillary           Lymph nodes, suillary         Lymph nodes, inguinal and femoral           Lymph nodes, retroperitoneal         Lymph nodes, mose, appendiceal	11231611437111
Mammary glands.  Gall bladder.  Omentum, specimens from.  Muscles, specimens from.  Muscles, specimens from.  Amputated lower extremities.  Amputated upper extremities.  Nerve, ulnar.  Joints, specimens from.  Bones, specimens from.  Artery, aneurysm of.  Lymph nodes, cervical  Lymph nodes, submaxillary.  Lymph nodes, submaxillary.  Lymph nodes, exitoal  Lymph nodes, inguinal and femoral  Lymph nodes, inguinal and femoral  Lymph nodes, neso-appendiceal  Lymph nodes, neso-appendiceal  Lymph nodes, location unknown.  Colon Hospital autopsy sets of tissues.	112316114371113
Mammary glands.  Gall bladder.  Omentum, specimens from.  Muscles, specimens from.  Tendons, specimens from.  Amputated lower extremities.  Amputated upper extremities.  Nerve, ulnar.  Joints, specimens from.  Bones, specimens from.  Artery, aneurysm of.  Lymph nodes, supraclavicular.  Lymph nodes, supraclavicular.  Lymph nodes, submaxillary.  Lymph nodes, axillary.  Lymph nodes, neguriar.  Lymph nodes, pitrochlear  Lymph nodes, retroperitoneal  Lymph nodes, retroperitoneal  Lymph nodes, retroperitoneal  Lymph nodes, nesso-appendiceal  Lymph nodes, location unknown.	112316114371113
Mammary glands. 11 Gall bladder. 0 Omentum, specimens from. 11 Muscles, specimens from. 12 Muscles, specimens from. 12 Amputated lower extremities. 13 Amputated upper extremities. 14 Nerve, ulnar. 15 Joints, specimens from 15 Bones, specimens from 16 Artery, aneurysm of 16 Lymph nodes, cervical 16 Lymph nodes, submaxillary 17 Lymph nodes, submaxillary 17 Lymph nodes, specimens from 18 Lymph nodes, specimens from 19 Lymph nodes, specimens from 19 Lymph nodes, submaxillary 19 Lymph nodes, specimens from 19 Lymph nodes, negrand and femoral 19 Lymph nodes, inguinal and femoral 19 Lymph nodes, meso-appendiceal 19 Lymph nodes, meso-appendiceal 19 Lymph nodes, meso-appendiceal 19 Lymph nodes, meso-appendiceal 11 Lymph nodes	112316114371113-0
Mammary glands	112316114371113-0
Mammary glands. 11 Gall bladder. 0 Omentum, specimens from. 11 Muscles, specimens from. 12 Muscles, specimens from. 12 Amputated lower extremities. 13 Amputated upper extremities. 14 Nerve, ulnar. 15 Joints, specimens from 15 Bones, specimens from 16 Artery, aneurysm of 16 Lymph nodes, cervical 16 Lymph nodes, submaxillary 17 Lymph nodes, submaxillary 17 Lymph nodes, specimens from 18 Lymph nodes, specimens from 19 Lymph nodes, specimens from 19 Lymph nodes, submaxillary 19 Lymph nodes, specimens from 19 Lymph nodes, negrand and femoral 19 Lymph nodes, inguinal and femoral 19 Lymph nodes, meso-appendiceal 19 Lymph nodes, meso-appendiceal 19 Lymph nodes, meso-appendiceal 19 Lymph nodes, meso-appendiceal 11 Lymph nodes	112316114371113-0
Mammary glands. 11 Gall bladder. 0 Omentum, specimens from. 12 Muscles, specimens from. 12 Muscles, specimens from. 12 Amputated lower extremities. 13 Amputated upper extremities. 14 Amputated upper extremities. 15 Nerve, ulnar. 15 Joints, specimens from 16 Bones, specimens from 17 Artery, aneurysm of 17 Lymph nodes, cervical 17 Lymph nodes, submaxillary 17 Lymph nodes, submaxillary 17 Lymph nodes, submaxillary 17 Lymph nodes, specimens from 18 Lymph nodes, inguinal and femoral 18 Lymph nodes, inguinal and femoral 18 Lymph nodes, inguinal and femoral 18 Lymph nodes, meso-appendiceal 19 Lymph nodes, meso-appendiceal 19 Lymph nodes, meso-appendiceal 19 Lymph nodes, meso-appendiceal 11 L	112316114371113-0
Mammary glands	112316114371113-0
Mammary glands.  Gall bladder.  Omentum, specimens from.  Muscles, specimens from.  Tendons, specimens from.  Amputated lower extremities.  Amputated upper extremities.  Nerve, ulnar.  Joints, specimens from.  Bones, specimens from.  Bones, specimens from.  Lymph nodes, cervical.  Lymph nodes, subraclavicular.  Lymph nodes, meso-appendiceal.  Lymph nodes, meso-a	1 1 2 3 1 6 1 1 4 3 7 1 1 1 3 - 0 N
Mammary glands. 11 Gall bladder. 0 Omentum, specimens from. 1 Muscles, specimens from. 1 Muscles, specimens from. 1 Amputated lower extremities. 1 Amputated upper extremities. 1 Nerve, ulnar. 1 Joints, specimens from 1 Bones, specimens from 1 Artery, aneurysm of 1 Lymph nodes, cervical 1 Lymph nodes, submaxillary 1 Lymph nodes, submaxillary 1 Lymph nodes, specimens from 1 Lymph nodes, specimens from 2 Lymph nodes, specimens from 3 Lymph nodes, submaxillary 1 Lymph nodes, specimens from 3 Lymph nodes, negrand and femoral 1 Lymph nodes, inguinal and femoral 1 Lymph nodes, inguinal and femoral 1 Lymph nodes, meso-appendiceal 2 Lymph nodes, meso-appendiceal 2 Lymph nodes, meso-appendiceal 2 Lymph nodes, meso-appendiceal 3 Lymph nodes, meso-appendiceal 4 Lymph	1 1 2 3 1 6 1 1 4 3 7 1 1 1 3 - 0 N 5
Mammary glands. 1 Gall bladder. 0 Omentum, specimens from. 1 Muscles, specimens from. 1 Tendons, specimens from. 1 Amputated lower extremities. 1 Amputated upper extremities. 1 Amputated upper extremities. 1 Nerve, ulnar. 1 Joints, specimens from 1 Bones, specimens from 1 Artery, aneurysm of. 1 Lymph nodes, cervical. 1 Lymph nodes, submaxillary. 1 Lymph nodes, submaxillary. 1 Lymph nodes, peritochlear 1 Lymph nodes, inguinal and femoral 1 Lymph nodes, inguinal and femoral 1 Lymph nodes, netroperitoneal 1 Lymph nodes, location unknown 1 Colon Hospital autopsy sets of tissues 4 Total. 1,16 PRINCIPAL LESIONS ENCOUNTERED IN SURGICAL SPECIMENS OTHER THAN INFLAMMATORY.  Maligrant tumors (repeated specimens same case excluded). Uterus. 1 Breast. 1	112316114371113-0 N 55
Mammary glands.  Gall bladder.  Omentum, specimens from.  Muscles, specimens from.  Muscles, specimens from.  Amputated lower extremities.  Amputated upper extremities.  Nerve, ulnar.  Joints, specimens from  Bones, specimens from  Artery, aneurysm of.  Lymph nodes, cervical  Lymph nodes, submaxillary.  Lymph nodes, submaxillary.  Lymph nodes, specimens from des, inguinal and femoral.  Lymph nodes, inguinal and femoral.  Lymph nodes, meso-appendiceal.  Lymph nodes, meso-app	1 1 2 3 1 6 1 1 4 3 7 1 1 1 3 - 0 N 5

# Malignant tumors—Continued.

Lower lip	3
Lower lip. The nares.	2
Scalp and cheek.	1
Face	2
Stomach	1
Penis	1
Larynx	1
Eyelids	1
Floors of mouth and tongue	1
Scrotum and perineum	1
Vagina and inguinal glands	1
Back of hand	1
Back of hand Omentum (primary growth unknown)	1
Tube and ovary	1
Leg	1
Ovary	1
Lower maxilla	1
Carotid body with metastases.	1
Total	44
- 4	
Benign tumors.	
Denign tumors.	
The state of the s	
Fibro-adenoma of breast	4
Intracanalicular adeno-fibroma of breast	
Mixed tumor of parotid gland	4
Psammoma of the brain	1
Osteo-chondroma of a rib	1
Lipoma of the back	1
Epulis, upper jaw	1
Fibro-myomato-uteri	22
Dermoid cyst of the ovary	
Cystadenoma of the ovary	1
Simple cysts of the ovary	- 11
Cystic thyroid glands	7
Exophthalmic goiter	
Hemangioma of the lip	
Fibro-hemangioma of the chest Sublingual cyst	
Sublingual cyst	1
Fibromata of the skin Sebaceous cysts in wall of abdomen	4
Sebaceous cysts in wall of abdomen	1
Sebaceous cysts of face	1
Rectal polyp	1
Nasal polyp	12
Polyp of the endometrium Pigmented papilloma of the back	2
Pigmented papilloma of the back	
Papilloma of the face	
Papilloma of the hand	4
Papilloma of the tonsils.	2
Papilloma of the lip.	
Papilloma of the tongue	
Papilloma of the external auditory canal	,
Total	98
Total	36
Specimens showing tuberculosis.	
Epididymis	-
Tartiele	-
Testicle	
Bladder and prostate	-
Sinus in perineum	
Sinus in scrotum	1
Fallopian tube Abscess of the buttock	4
	1
Abscess of thigh.	

# Specimens showing tuberculosis—Continued.

Appendix	5
Appendix. Omentum.	1
Tongue (ulcer at root)	1
Tendon sheath	1
Skin of the neck	1
Tonsils (pairs) and adenoids	1 3
Adenoid	1
Lymph nodes, cervical	1Ô
Lymph nodes, supraclavicular	
Lymph nodes, axillary	2
Lymph nodes, anitarables	$\frac{1}{2}$
Lymph nodes, epitrochlear Lymph nodes, unknown location.	1
Lymph nodes, unknown location	1
m . 1	
Total	40
Other infragrent lesions encountered	
Other infrequent lesions encountered.	
Leprosy	7
Cala of fact	- 1
Sole of foot.	
Palm ulcer 1	
Ulnar nerve	
Skin nodule 1	
Skin nodule	
Nasal septum	
Ptervgium. 1	
Pterygium	17
Dermatomycosis	1
Dermatomycosis	1
Hodgkin's disease	2
Hodgkii s disease.	4
Filariasis of epididymis and lymph node	1
Filariasis of an inguinal lymph node	2 1 2 1 1 1 1 1 1 1 1 1 1 1 2 2 2 1 1 1 1 2 2 2 2 2 2 2 2 2 2 3 2 2 2 2
Gas gangrene, amputated leg	1
Ainhum	- 1
Jigger infestation sole of foot. Gauze sponge encapsulated in pelvis 14 years	1
Gauze sponge encapsulated in pelvis 14 years	1
Umbilical chancre	1
Intuiguignantion	î
Intussusception. Congenital cyst of the trachea.	î
Congenital cyst of the trachea.	î
Congenital cystic kidney Ectopic pregnancy (two at full term in broad ligament and tube)	1
Ectopic pregnancy (two at full term in broad ligament and tube)	0
Duodenal ulcers	2
Appendices filled with oxyuris vermicularis parasites	5
<del>-</del> -	
Total	52
A review of the meningitis autopsy records during the ye	ars
1907 to 1920, inclusive was made and the following table was co	m-
ill d. Destricted in the manner and the table was to	
piled. Bacteriological examinations were conducted at autop	sy.
Agglutination of the recovered organisms was carried out but	no
typing done.	
Pneumococcus meningitis	66
(This excludes pneumococcus meningitis which occurred as a lesion in pneumococcus	
septicemia or pyemia.)	
• • • • • • • • • • • • • • • • • • • •	FC
Simple meningitis (streptococcus, staphylococcus, etc.)	56
(This also excludes septicemia and pyemia of these natures associated with meningitis.)	
	30
Tuberculous meningitis	00
lation 1	
lesion.)	
Cerebrospinal fever (epidemic form)	11
Cerebrospinal fever (epidemic form)	11
(This excludes one case which died long after an attack of meningitis in which the only	11
Cerebrospinal fever (epidemic form).  (This excludes one case which died long after an attack of meningitis in which the only lesions found were meningococcic arthritis—shoulder and hip abscesses.)  Influenzal meningitis.	11

Au- topsy No.	Date admitted.	Race.	Age.	Local residence.
1295 1804 1815 3760 3766	December 25, 1907 September 10, 1909 September 20, 1909 December 15, 1913 December 23, 1913	Martinique negro Martinique negro Colombian negro Jamaican Mexican	Years 22 25 30 11 24	Gatun, C. Z. Gatun, C. Z. Gatun, C. Z. Panama City. S. S. City of Para, Balboa Har- bor
3919 4941	April 10, 1914 May 22, 1917	Jamaican		Paraso, C. Z. S. S. Huntington, Balboa Har- bor.
5052 5244	August 31, 1917 May 28, 1918	West Indian negro Japanese	1½	Panama City. S. S. Anyo Maru, Balboa Harbor.
5377 <b>544</b> 6	November 25, 1918 February 20, 1919	West Indian negro West Indian negro	27 30	Panama City. Panama City.
Hogs Horses Dogs Goats Cat Chicke Guinea Rabbit Deer Monke Iguana Porcup Pigeon Saura ( Fish	ns. pigs s. ys. ine. (native opossum).			18 111 5 23 23 1 3 34 7 15 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Anin	nals (wild and dom	iestic), examinati	on:	
Tissue Tissue Blood Blood Blood Blood Blood Hemog Hemog Brain Dog st	specimens from hogs. specimens from dogs. films from cattle. films from deer films from dog. films from iguana films from porcupine tobin tests on cattle. dobin tests on dogs. films from cattle. dobin tests on dogs.			77 4 43 640 557 411 88 66 11 49 288 333 433 55

The principal diseases encountered that were important among domestic animals were as follows:

Anthrax (cattle).

Piroplasmosis (cattle, horse, dog, deer.)

Hog cholera.

Tuberculosis (dairy cattle and hogs).

Umbilical infections (calves).

Myiasis (screw-worm infections of hide sores and umbilicus).

Poisoning by cattle dip contaminations. Oesophagostomiasis nodularis (goats).

Uncinariasis (chiefly dogs and young calves).

Bacillus paratyphosus B. (Guinea pigs). Gas bacillus septicemia (three hogs).

Actinomycosis (one calf).

Rats and mice examined	17.080
Mus musculus 10,326	
Mus alexandrinus	
Mus norvegicus	
Mus rattus	

# Animal experimentation.

Biting experiments with the deer and cattle ticks. Both types developed on either animal as a host. Deer piroplasmosis was given to a calf and cattle piroplasmosis was given a fawn raised in captivity. In each case the infections were light as shown by blood film examinations. Work is to be continued.

## General miscellaneous examinations, human:

Films taken from the maternal surface																	
per cent)			 			 	٠.	٠.	٠.	٠.	٠.	٠.	٠.	٠.			
Blood films examined for malaria			 	٠.		 						٠.		٠.			
Stools																	
Urine																	
Films from ulcer on wrist (Oriental sore																	
Films from nasal passages			 	٠.	٠.	 ٠.			٠.								
Films from ulcer in palate of mouth			 			 ٠.			٠.								
Cigarette tobacco molds			 			 					٠.				 		
External descriptions of bodies not auto	opsie	ed	 			 	٠.										
Feces examined for parasites and ova			 			 											

# Microscopic slides prepared:

Surgical preparations

Autopsy preparations. Animal tissue preparations.	. 4,404
Total	. 12,152
Paraffin preparations. Frozen preparations.	. 12,034 . 118
m <sub>ed-1</sub>	19 159

6 140

### CHEMICAL DEPARTMENT.

Arsenical cattle dip	9
Acetone	2
Alkaloids, for identification	3
Anthrax serum, pheno l:sontent	1

### CHEMICAL DEPARTMENT—continued.

Beverages:	
For preservatives	1
For alcohol content.	14
For denaturants	5
Cotton	1
Bloods examined	176
Nonprotein nitrogen	
Urea nitrogen	
Urea	
Uric acid	
Glucose	
Cholesterin 11	
Carbon dioxide	
Calcium1	
Bread	3
Bullet	1
Butter	Ę
Cream	1
Crude carbolic acid	4
Calibration of clinical thermometers	1,000
Cocoa, powdered glass	1
Clay	2
Clay, for arsenic	1
Caterpillars, for arsenic	3
Calf meal	ě
Cigarettes	1
Cognac	
Drug, narcotics	1
Eggs	j
Fluid, for arsenic	1
Feed, for arsenic	1
Flour	
Hide, for arsenic	
Hide scrapings, for arsenic.	0.1
Gastric analyses	31
Gasoline.  Hydrogen, peroxide.	
Hominy, lye	
Iron ore	1
Ice cream	27
Kerosene	1
Lard substitute	1
Matches, safety	21
Milks, dairy, food value	184
Milks, dairy, for preservatives	3
Milks, condensed	
Milks, evaporated. Milks, mothers'.	91
Milks, powdered.	-
Mahogany filler	j
Mineral	
Oil. Diesel.	2
Oil, castor Oil, fuel	1
Oil, fuel	2
Opium, for identification	
Oleomargarine	24
Oysters, canned, lot	
Oysters, fresh, lot	
Potatoes. Powder, vegetable.	
Rice	
Rosin	,
Spinal fluids, for arsenic.	1
Spinal fluids:	
Colloidal gold	
Butyric acid	
Ammonium sulphate	
Phenol	

#### CHEMICAL DEPARTMENT-Continued.

Stomach of cow, arsenic. Stomach contents of horse, phenols.	1
Silk	î
Sugar, percentage of sucrose	à
Sugar cane	1
	2
Soil, for arsenic.  Toxicological examinations.	7
	- 1
	100
Urine examinations	106
Routine	
Arsenic	
Urea	
Urea nitrogen	
Acetone bodies	
Glucose 21	
Nitrogen partition	
Lead11	
Mercury 1	
Calcium 1	
Renal function	
Urine, bovine, for arsenic	4
Vinegar	î
17	î
	i
Water, complete analysis Water, for arsenic	2
	1
Washings from milk bottle	1

The work of the chemical laboratory during the year 1920 has consisted mostly of routine analytical work, which is given in the

above tabulated form.

The working out of a method for the utilization of two shipments of crude carbolic acid received at the larvicide plant consumed considerable time. While conforming to specifications as to "tar acid" content and specific gravity, these two shipments differed from the crude carbolic acid received heretofore in some manner yet not thoroughly understood, and were not capable of being worked into a satisfactory larvacide by the method which has been in use at the larvicide plant for several years. In all our previous experience with the manufacture of larvicide no crude carbolic acid similar to these two shipments has been received, and no trouble has ever before been experienced in the manufacture of larvicide. After considerable experimental work in the laboratory it was found that sulfonation of the crude carbolic acid by treatment with concentrated sulphuric acid and heat would so alter its deportment in the usual process of manufacture as to produce a satisfactory larvicide. This method was tried at the larvicide plant on a larger scale and found to produce a good larvicide. The whole of the two shipments of crude carbolic acid were made into larvicide with this additional treatment. The following shipments of acid have been of the same grade as was received previous to the two unsatisfactory lots, so that it has not been necessary to use the sulfonation process recently.

An intensive study, from the laboratory standpoint, of the colloidal gold reaction with spinal fluids has been carried on during the greater portion of the year, with special attention to the preparation of the colloidal gold. This work will be carried on during the coming year, as in the past, in connection with the routine performance of the

colloidal gold reaction.

The preparation of the ethyl esters of the fatty acids of chaulmoogra oil has been started and about 700 grams prepared to date. Sufficient experimental work has been done to place the production of the esters on a safe working basis, and the preparation in sufficient quantities for use at the leper colony has been commenced.

### PHOTOGRAPHY.

A considerable number of photographs were taken at the laboratory during the year. These represented a variety of medical, surgical, dermatological, pathological, and entomological subjects. A number of miscellaneous objects of a medico-legal character, or other material in cases where photographs were desired as part of a permanent record were photographed.

### ENTOMOLOGICAL REPORT.

In the entomological department work was carried on in practically all branches of entomology throughout the year, and insects belonging to the various orders examined and classified. Investigations on various problems in connection with medical, agricultural,

and general entomology were conducted.

The examination and classification of adult mosquitoes collected in habitations was continued throughout the year. A large percentage of the specimens received consisted of adults taken in the daily hand catches in married quarters, military posts, camps, etc., in the Zone. Camps outside the Zone, such as the U. S. Army camp at David, R. P., and field camps at other points, also sent in catches of adult mosquitoes for identification at frequent intervals. was of considerable value in establishing an index to the various types present at the camps and in determining the prevalence of species concerned with the transmission of disease. Specimens collected on board ships, shortly after their arrival from ports where mosquito-borne diseases were potentially present, were also received from time to time.

A considerable number of lots of mosquito larvæ were received from various points in the Zone and the cities of Colon and Panama, for identification during the year. The value of this work in indicating the types and prevalence of mosquitoes breeding in the different areas is quite apparent. More especially is this important at points where no hand catches of adults are being made.

The following table shows the number of species of adult mosquitoes and larvae classified during the year:

	Adults.	Lots of larvae.
Culicini:		
Anopheles albimanus	6.023	22
Anopheles tarsimaculata	4,613	15
Anopheles pseudopunctipennis	469	8
Anopheles punctimacula	111	2
Anopheles apicimacula	31	6
Anopheles argyritarsis	4	5
Anopheles eiseni	2	3
Total number of anopheles	11,253	59

	Adults.	Lots of larvae.
Culicini—Continued:		
Aedes calopus	497	492
Aedes taeniorhynchus	2,330	10
Mansonia titillans	1,684	1
Mansonia nigricans	15	
Mansonia fascillatus	10	
Aedeomyia squamipennis	5	1
Culex quinquefasciatus	5,719	152
Culex coronator	4	34
Culex corniger		20
Culex proximus		6
Culex factor		5
Culex equivocator		5
Culex leprincei		4
Culex elevator		2
Culex jubilator		2
Culex revelator		2
Culex declarator		1
Culex extricator		1
Culex reflector		1
Culex chrysonotum		1
Culex spp	4,012	71
Psorophora lutzii	47	
Uranotaenia geometrica		1
Haemogogus, lutzii, deinocerites, etc	81	4
Total culicini minus anopheles	14,404	817
Sabethini:		
Wyeomyia, etc	353	. 3
Total of mosquitos identified	26,010	879

During the period extending from March to December, inclusive, there were 1,274 separate lots of adult mosquitoes received for identification. No records were kept of the number of lots received during January and February.

Nearly all of the mosquito larvæ came from Panama City and Colon and when it is considered that practically each lot meant a breeding place it speaks very well for the vigilance of the Health Department of Panama and Colon in locating so large a number. It also indicates that, even after nearly 16 years of American sanitation, it is quite probable that a considerable amount of mosquito breeding would occur in the city if the American regulations were relaxed or the sanitary inspectors removed. The large percentage of larvæ as shown in the above table being those of the yellow fever mosquito, Aedes calopus Miegen, emphasizes the necessity for constant vigilance in controlling mosquito-breeding and the maintaining of close quarantine restrictions.

The entomologists made a number of inspection trips of various kinds to different points in the Zone throughout the year. Among these inspections were included: Juan Mina citrus grove to observe insects of economic importance; Farfan Camp to investigate mosquito-breeding; Corozal for examination of Larro cattle feed; Paraiso, Darien, and other points on the line to observe mosquito flights; Corozal Hospital to determine if fleas were infesting the wards, and many other investigations of various kinds.

Identifications were made of many ticks, fleas, lice, flies, fly larvæ causing myiasis in man and in animals, termites, beetles, scale insects, etc.

Life history and control studies were conducted on the papaya fruit fly, toxotrypana curvicauda Gerst, and the spiny citrus white

fly, Aleurocanthus woglumi Ashby.

Reports were made on the control of the Banyan Thrips (Cuban Laural Thripes); the Fall Army worm; and various insects attacking trees and foliage in Ancon Hospital grounds.

A survey and identification of the fleas found infesting the different

species of rats in the Canal Zone and Panama is being made.

Observations on certain phases of the bionomics of the yellow fever mosquito, *Aedes calopus* Miegen, are being conducted.

### UNDERTAKING DEPARTMENT.

In October an addition of one room was built onto the laboratory. This room is approximately 14 by 24 feet and occupies the space between the main laboratory building and the crematory building. This room provides space for the sealing, crating, and temporary storing of embalmed bodies, free access to the refrigerator, and is also used as a general utility room by the undertaker.

about the desired activity about by the annual transcer.	
Number of bodies received (5 disinterred)	473
Number of bodies embalmed	
Number of bodies cremated	
Number of bodies buried on Isthmus	
Number of bodies shipped	

## ADMISSION RATE PER 1,000 EMPLOYEES.

### HOSPITALS AND QUARTERS.

ALL CAUSES.

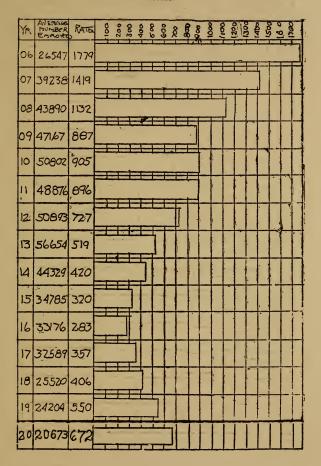


CHART No. 1.

# DEATH RATE PER 1,000 EMPLOYEES.

ALL CAUSES.

YR	AVERAGE EMPLOYED	Pene	0 20 60
06	z6547	41.73	
07	39238	2874	
08	43890	13.01	
09	47167	10.64	
10	50802	10.98	
11	48876	11.02	
12	50893	9.18	
B	56654	835	
14	44329	7.04	
15	34785	হ77	
16	33/76	6 <i>0</i> 3	
17	32589	7.09	
B	25520	8.11	
19	24204	7.23	
20	20673	870	

CHART No. 2.

# NONEFFECTIVE RATE PER 1,000 EMPLOYEES.

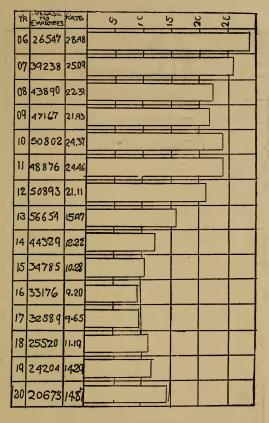


CHART No. 3.

MALARIAL FEVER.
ADMISSION RATE PER 1,000 EMPLOYEES.

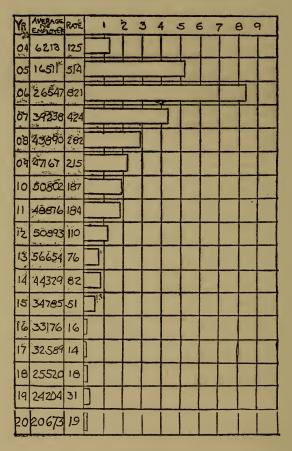


CHART No. 4.

MALARIAL FEVER.

DEATH RATE PER 1,000 EMPLOYEES.

YR	AVERAGE NUMBER EMPLOYEE	PATE	-		۰, د	) 4	رى .	9	, ,	
04	6213	266								
05	165/1	<i>5.5</i> 7								
06	26547	7.45								
07	3 <i>9</i> 238	3.57		··						
08	43,890	1.37								
09	47167	. 65								
10	50802	-81								
11:	48876	.84								
12	<i>5</i> 0,e93	.31				-				
13	56654	-30								
14	44329	.14	]							
15	10	.23	]				+			
16	33176	.06								
17	32589	29								
18	25520	.08	]							
19	24204	.08								
20	20673	.15		-						

CHART No. 5.

# MALARIAL FEVER.

DEATH RATE PER 1,000 POPULATION IN THE CANAL ZONE AND THE CITIES OF PANAMA AND COLON.

EMPLOYEES AND NONEMPLOYEES.

			*-									
YR.	POPULATION	RATE		1.	2, 3	3, .4	4 3	5	6	7 8	3	7
0%	73264	9,49										
07	102133	5.37						J				
08	120097	336										
09	135780	2.07	, -		]			-				
10	151591	1.89				1						
17	156.936	1.82				,	-					
12	14600	1.64										
ارًا	129104	1.32					-					
14	123592	1,27				-						
5	121650	ارِّيْ	j									
16	116918	.21	]			1						V
ין דו	114003	18						1				
18	109757	,LB,									-	
19.	13958	此										
20	114047	:08										

CHART No. 6.

Table I.—DISCHARGES FROM HOSPITALS, DEATHS, AND NONEFFECTIVE RATES FOR EMPLOYEES.

### ABSOLUTE NUMBERS.

	Average number of employees.	Discharges from hospitals and deaths.				Deaths.	Noneffective from sickness.		
		Total.	Diseases.	External causes.	Total.	Diseases.	External causes.	Days treated.	Constantly noneffective.
Year, 1920: White Colored	4,688 15,985	1,393 3,183	1,252 2,550	141 633	22 158	17 136	5 22	31,775 80,760	
Total	20,673	4,576	3,802	774	180	153	27	112,535	307.46
Year, 1919: White Colored	4,523 19,681	1,271 3,834	1,141 3,121	130 713	10 165	8 142	2 23	27,338 98,891	
Total	24,204	5,105	4,262	843	175	150	25	126,229	345 83

### PROPORTIONATE NUMBERS.10

Year, 1920: WhiteColored	4,688 15,985	297.14 199.12	267.06 159.53	30.08 39.59	4.69 9.88	3.63 8.51	1.06 1.37	 18.52 13.80
Total	20,673	221.35	183.91	37.44	8.70	7.40	1.30	 14.87
Year, 1919: White Colored	4,523 19.681	281.01 194.81	252.27 158.58	28.79 36.23	2.21 8.38	1.77 7.21	0.44 1.17	 16.55 13.77
Total	24,204	210.92	176.09	34.83	7.23	6.20	1.03	 14.29

<sup>10</sup> Annual average per 1,000 employees.

# TABLE II.—CAUSES OF DEATHS OF EMPLOYEES BY COLOR,

	Color. Age (in years).						).	
Cause of death.			0	2	0	2	0	20
	W.	B.	15-20	21-25	26-30	31-35	36-40	41-45
Typhoid fever	3	3	1			;.		2
nfluenza	2	19	·····2	5	6	1 3		1
Dysentery, entamebic		1						
retanus		1						
Pellagra Fuberculosis of the lungs		19	1	3	11	9		3
Abdominal tuberculosis		1						1
Pott's disease		1 2 8			1	1	;.	
Disseminated tuberculosis		8		1	2	1	4	
Syphilis, tertiary		1			1	•		
and liver	1							
Cancer and other malignant tumors of the perito-	1		1					
neum, intestines, rectum	1							
and of organs not specified		2				1		1
Purpura hemorrhagica					1			
EncephalitisPneumococcus meningitis				1	1::::		1	
Cerebral hemorrhage, apoplexy	1	5						1
Softening of brain	. 1	1 2				· · · ·	;.	
General paralysis of the insane						1	1	
Organic diseases of the heart				1	2	2	2	2
Aneurysm		. 3						
Arteriosclerosis		. 2						1
Acute bronchitis		. i			1			
				3	4		2	
Broncho-pneumonia Pneumonia (unqualified) Lobar pneumonia		. 2		1		1 2		1
Gangrene of the lungs					1	1	l	
Gangrene of the lungs		. 1						1
Ulcer of stomach					. 1			
Acute gastritis	·   · · ;	i i		1		1::::	1	
Inguinal hernia	: :	. 2						1
Other hernias	. 1	. i						
Intestinal obstruction				1				
Cirrhosis of the liver	. 1				1			
Bright's disease	. 2	11			. 2	1	1	5
Salpingitis and other diseases of the female genital organs		. 1		1	1			
Phlegmon and cellulitis		. 1	1::::		1			
Diseases of the bones		. 1					1	
Suicide by firearms.  Acute poisonings.		1 1			. 1	1		
Rurne		. 1					1	
Accidental drowning Traumatism by cutting or piercing instruments Traumatism by fall	. 1	6	1	1	1	1	1	1
Traumatism by cutting or piercing instruments	: ''i	. 1						1
Traumatism by machines.	:  <b>:</b>	. 1	1					
Trailmatism by other crushings	. 2	1 2 1 3 3		. 1	1	1	1	1
Railroad traumatism		3			i	. 2		1
Homicide by cutting or piercing instruments	. i	1	1			. 1	1	
Other external violence		. 1				. 1		
Electricity Homicide by cutting or piercing instruments. Other external violence. Cause of death not specified or ill-defined.	. 1				. 1			
Total		سندوا اد	6	22	29	33	25	28
							1	1

## AGE, AND LENGTH OF RESIDENCE ON ISTHMUS.

Αg	Con	n ye	ied.					Le	ngth	of re	siden	ce or	Isth	mụs	(in y	ears).			
46-50	51-55	29-99	66-75	76-85	-1	1-2	2-3	3-4	4-5	5–6	2-9	2-8	8-10	10-15	15-25	25-40	Life.	Unknown.	Total.
;							 1							1	1		1		1
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::	i	1	1							1	1			2	i		4	2	
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13	11	10	2	1	2	1	3	1	1	8	6	15	11	54	21	3	25	29	1

Table III.—DEATHS OF RESIDENTS, AND DEATH RATES, OF THE CITIES OF PANAMA, COLON, AND THE CANAL ZONE.

Place.	Average popula-		Deaths.			ial rate pe population	
	tion.	Total.	Disease.	External causes.	Total.	Disease.	External causes.
Year, 1920:							
Panama	60,500	1,297	1,246	51	21.44	20.60	0.84
Colon Canal Zone	26,078 27,459	554 242	517 211	37 31	21.24 8.81	19.82 7.68	1.42
Canal Zone	27,400	242	211		0.01	7.00	1.10
Total	114,037	2,093	1,974	119	18.35	17.31	1.04
Year, 1919:							
Panama	61,369	1,211	1,165	46	19.73	18.98	.75
Colon.	26,078	573	536	37	21.97	20.55	1.41
Canal Zone	26.511	229	207	22	8.64	7.81	.83
Total	113.958	2,013	1,908	105	17.66	16.74	.92



## $\ensuremath{\mathsf{TABLE}}$ IV.—DEATHS OF RESIDENTS OF THE CANAL ZONE AND THE PLACE OF

	Se	х.	C	Color.		A	ge (in	years)	
Cause of death.	М.	F.	w.	В.	Υ.	Un- der lyr.	1-4	5-10	11-20
General diseases.									
Typhoid fever Paratyphoid fever Malarial fever, estivoautumnal. Measles. Scarlet fever. Whooping cough Diphtheria and croup. Influenza. Dysentery. Entamebic. Bacillary. Unclassified.	3 1 7  5 39 1 4 4	1 1 2 1 1 2 2 2 2 23	10	4 2 3 1 1 2 7 52 1 3 4 1 5		1 2 1 6	1 4 5 1	2 1	5
Leprosy. Mumps. Hemoglobinuric fever, unqualified. Purulent infection and septicemia. Pyemia Septicemia. Pyemia and septicemia, pneumo-	3 1 5	2 1 2 1 4	1	1 1 4 1 7	i	i	1	i	1
coccie. Tetanus. Pellagra Beriberi Tubereulosis of the lungs. Acute miliary tubereulosis. Tubereulosy meningitis.	1 2 1 1 140 5 4	1 6 122 10 5	1 21 2 3	2 3 6 1 232 13 5	9	5 3 1	1		23
Abdominal tuberculosis.  Pott's disease.  White swellings: Tuberculosis of bones and joints.  Tuberculosis of other organs.  Tuberculosis of the larynx.  Tuberculosis of the lymph glands.	3 3 1 1 1 1	i	1	3 3 1 1 1 1			1	1	. 1
Tuberculosis of the genito-urinary organs. Disseminated tuberculosis. Rickets. Syphilis, tertiary. Syphilis, hereditary. Syphilis, period not stated.	10 8	1 14 1 4 1	3	3 42 1 14 6 3	1	3	1	3	4
Cancer and other malignant tumors of the buccal cavity	3 8	3 5	2	11					
and pharynx Cancer and other malignant tumors of the peritoneum, intestines, rec- tum. Cancer and other malignant tumors	3		2	1					
of the female genital organs Cancer and other malignant tumors of the breast		12		12					2
of the skin		5	1 4	16	1				1

	1	Age (in y	rears)—C	Continued	l.		I	Place of	residence	e.
21-30	31-40	41-50	51-60	61-75	76-100	Age un- known.	Pan- ama.	Colon.	Canal Zone.	Total
	1	2						3	1	
	$\frac{1}{2}$	2					2 4	í	4	
							î			
		1					$\frac{1}{2}$		1	6
							2 5 29	2 10		
26 1	12	6		1				10	23	
	1	1	1				3	1	2	
							1 1			
1	2	- 1	1				2	1	3	
	1							1	1	
	1	2	1	1	,		2	2	1 1 2 3	
	2	1	1	2			4	2	3	
	1 1	1	1				1	1 2		
2	1 3	1					5	1	1	
1 106	73	27	16	3			$\begin{array}{c} 1 \\ 169 \end{array}$	83	10	26
	1	i					8 5	3	4	1
		i						3 2 3 1	2	
1	1						2	ĭ		
								1		
				1			1			
	1						1		1	
7	1 8	5	6	2			1 18	2 14	11	4
								1		
2	5	3	2	1		;	10 6	$\frac{1}{2}$	2	1
1	2	1					4			
	1	2		2	1		5	1		
	1				1		0	•		
1	1	4	3	3	1		8	2	3	1
•	•	•			1				, i	Ī
		1	2				2		1	
									•	
2	2	3	3				10	2		1
	1						1			
		i	1				1			
			1				1			
2	4	7		5	2		17	2	2	2

# $\ensuremath{\mathsf{TABLE}}$ IV.—DEATHS OF RESIDENTS OF THE CANAL ZONE AND THE PLACE OF

	s	ex.		Color		A	ge (in	years	).
Cause of death.	М.	F.	w.	В.	Y.	Un- der 1 yr.	1-4	5-10	11-20
General diseases.—Continued.									
Other tumors (tumors of the female genital organs excepted)	1 1 2 1 1 1  1	1 1 1 1 1 2 1	1	2 3 1 1 1 2 1 2 1 1 2 2 2 2	1		2		1
Encephalitis Simple meningitis Cerebrospinal fever Pneumococcus meningitis Locomotor ataxia. Other diseases of the spinal cord. Cerebral hemorrhage, apoplexy. Softening of the brain. Paralysis without specified cause. General paralysis of the insane. Other forms of mental alienation. Dementia precox. Epilepsy. Convulsions of infants (under 5 years of age). Neuritis. Tumor of the brain. Diseases of the ears. Otitis media.	4 11 2 7 1 3 23 2 1 9 1 1 1	2 5 3 4  29 1 2 1  1 4 1	11 11 11 12 22 55 11 11	6 9 4 10 3 388 1 1 5 2 4 1 1 2 6	1	1 3	2 1 3	2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Pericarditis. Acute endocarditis. Malignant endocarditis. Organic diseases of the heart. Angina pectoris. Diseases of the arteries, atheroma, etc. Aneurysm Arteriosclerosis Embolism and thrombosis. Phlebitis. Diseases of the lymphatic system (lymphangitis, etc.) Lymphadenitis (nonvenereal). Hemorrhage; other diseases of the circulatory system.	2 6 4 48  2 15 14 2 1	5 4 2 31 1  2 12	1 1 7 1 2 3 1	6 9 6 682 15 22 1 1 1 2 1 1				1 3	1 7

		Age (in ;	years)—(	Continue	i.			Place of	residenc	е.
21-30	31-40	41-50	51-60	61-75	76–100	Age un- known.	Pan- ama.	Colon.	Canal Zone.	Tota
1	1 1 1	1 1	1				2 1 2 1 1 1 1 1 1 2	1 1 1 2 2 2 2	1	
3 6	2 1 2 1 7	1 1 12 1 4	1 1 1 11 2	11	3 1 1		2 14 3 7 1 2 40 1 3 7 1 1 2 1 2	2 1 1 2 1 6	2 1 1 2 6 2	:
		1					1 1	1 1 1	1 1 4	
1 1 8 2	1 2 2 22 22 6 1	12 3 5 1	1 14 14 13 11	10 1 2 4	5 1 5	1	6 7 5 43 2 12 20 1	1 2 1 28 4 5 1	1 8 1	1 1 2
							2 1			

 $\mathtt{Table}$  IV. —DEATHS OF RESIDENTS OF THE CANAL ZONE AND THE PLACE OF

	Se	ex.		Color.		A	kge (ir	ı years	;).
Cause of death.	М.	F.	w.	В.	Y.	Un- der 1 yr.	1-4	5-10	11-20
Diseases of the respiratory system.									
Diseases of the larynx.  Laryngitis. Acute bronchitis. Chronic bronchitis. Broncho-pneumonia. Pneumonia (unqualified). Lobar pneumonia. Pleurisy. Empyema. Pulmonary congestion, pulmonary apoplexy. Gangrene of the lungs. Asthma. Other diseases of the respiratory system (tuberculosis excepted). Abscess of the lungs.	1 30 5 73 12 47 2 1 3 3 2	2 18 7 55 10 19 5 1	2 2 20 4 6 1	1 2 46 10 108 18 59 6 2 3 6 1	1	3 51 3 5	17 4 34 7 4 1	2 1 6	3 2
Diseases of the pharynx: Follicular tonsillitis Stricture of the esophagus Ulcer of the stomach Ulcer of the stomach Cother diseases of the stomach (cancer excepted): Gastrectasis Acute gastritis Acute indigestion Diarrhea and enteritis (under 2 years) Colitis (under 2 years) Diarrhea and enteritis (2 years and	4 14 4 99 6	1 2 1 7 4 102 6	1 2 1 15 3	1 2 3 1 19 6 185 9	1		6 2 45 2	1	
over) Colitis (2 years and over). Appendicitis and typhlitis: Acute appendicitis Chronic appendicitis Hernia, intestinal obstructions Inguinal hernia. Other hernias. Intestinal obstruction Other diseases of the intestines. Constipation. Duodenal ulcer. Acute yellow attrophy of the liver. Cirrhosis of the liver. Biliary calculi. Other diseases of the liver (unqualified) Abscess of the liver (unqualified) Abscess of the liver (cholecystick)	6 1 7 1 1 8  1 1 9	7 3 2 1 2 2 1 7 4	5 2 1 1 2 2 1 1 1 2 2 1 1 1 2 2 1 1 1 1	13 4 4 1 1 1 4 8 1 1 1 1 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1	1		1	i	3 1 1
Diseases of the spleen. Simple peritonitis (nonpuerperal). Other diseases of the digestive system (cancer and tuberculosis excepted)	1 2	4	1	5					1

	-	Age (in y	rears)—C	ontinue	l.			Place of	residenc	e.
21-30	31–40	41-50	51-60	61-75	76–100	Age un- known.	Pan- ama.	Colon.	Canal Zone.	Total.
1 1 7 2 24 1 3	1 13 3 12 3 12 1 1 1	4 3 7	1 2 1 9 2	1 1 6	1 1		1 2 17 3 108 222 37 4 2	30 7 17 19 3	1 2 3 10	4 1 12 2 6
		1	2	1			2	2 2		
ii	1	1 1	1				1 2 1	3		
1 2	1 2	3	1				1 19 1 152 10	2 6 43 2	1 6	20
1	1			1	i		10	3 1		
1 2 2 1 1	. 2 . 1 . 3 . 1	1 2 2 2 2	1 2 1	3	1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3 5 1 1 4 2 1	3 1 1 2 2	

TABLE IV.—DEATHS OF RESIDENTS OF THE CANAL ZONE AND THE PLACE OF

	S	ex.		Color		A	ge (in	years	).
Cause of death.	М.	F.	w.	В.	Y.	Un- der 1 yr.	1-4	5-10	11-20
Nonvenereal diseases of the genito- urinary system and annexa.					-				
Acute nephritis Bright's disease (chronic nephritis) Other diseases of the kidney and an-	7 70	14 40	2 23	19 84	3	10.	5 2	3	1 3
Pyelo-nephrosis	3 8 1	5	2	11 		1 4 	3		
Cystitis Diseases of the prostate Hypertrophy of prostate	2 1 1	1	1	3 1 4					
Uterine tumor (noncancerous) Other diseases of the uterus Salpingitis and other diseases of the female genital organs		7	1	6					
The puerperal state.									
Ac idents of pregnancy Extra uterine pregnancy Hyperemesis gravidarum Purpperal hemorrhage Other accidents of labor		2 2 1 7 4	2 1 1	2 1 6 3					1
Puerperal septicemia. Puerperal albuminuria and convul- sions. Eclampsia		8 4 10	3 1 1	5 3 9					2
Diseases of the skin and of the cellular tissue.									
Acute abscess: Phlegmon and cellulitis	2	1		3					1
Diseases of the bones and of the organs of locomotion.			 						
Diseases of the bones (tuberculosis excepted)	2		1	1					1
Malformations.  Congenital malformations (stillbirth									
not included)  Diseases of early infancy.	12	12	3	21		21	3	••••	
Congenital debility, icterus, and sclerema. Premature birth Atrophy of infants. Malnutrition Other causes peculiar to early infancy	21 40 1 28	10 30 20	3 9	27 60 1 48	1	31 70 1 43	5		
(including various consequences of labor)	19	16	2	32	1	35			

	I	Age (in y	ears)—C	ontinued			1	Place of	residence	
21-30	31-40	41-50	51-60	61-75	76–100	Age un- known.	Pan- ama.	Colon.	Canal Zone.	Total.
12	22	2 26	20	16	8	1	. 14 63	6 39	1 8	2: 110
1 1	1 2 1 1	2	1 1	2 1	2		4 6 1 3	1 5	2	1
1	3	i	·····i	1			1	1 4 1	1	-
4	3						3	4		
2	i						1	1	1 1	
2 1 1 4 2 4	2 1 2	1					1 5 2 7	1 2	1 1	
3 7	1 1	1					1 5	2 4	1	1
1		1					3			
	1						1		1	
							10	5	9	2
							21	9	1	3
							47 17	13 1 15	10	7 4
							22	9	4	3

 $\mathtt{Table}$  IV.—DEATHS OF RESIDENTS OF THE CANAL ZONE AND THE PLACE OF

	~				1				1
Cause of death.	Sex.			Color.			Age (11	years	).
Cause of death.	М.	F.	w.	В.	Y.	Un- der 1 yr.	1-4	5–10	11–20
Old age.		l							
Senility	5	6	3	8					
Affections produced by external causes.									
Suicide by firearms	8		5	3					2
ments. Acute poisonings Burns (conflagration excepted) Accidental drowning	2 3 3 16	3 2 3	2 1 6	1 4 4 13	1	1	1 4	1	4
Traumatism by firearms	1		ĭ						ì
instruments.  Traumatism by fall.  Traumatism by machines.  Traumatism by other crushings (ve-	1 12 1	2	6	1 8 1	 		7	1	····i
hicles, etc)	6	2	6 1	14 6 1			1 1 1	2	2
Injuries by animals	1	i		1			1		
Lightning Electricity (lightning excepted) Homicide by firearms	. 2	1 6	2	1 3 8					3
Homicide by cutting or piercing instruments	. 3	2	2 2	5	1				
Fractures (cause not specified) Other external violence Legal execution	. 3	1	1 1	<u>1</u>	i				1
Ill-defined diseases.									
Ill-defined organic disease	. 3	2	2	2 3		. 1		1	
defined	. 13	10 1	2	21 2		. 9	8		2
Grand total	. 1,204	889	296	1,760	37	567	245	50	104

83

		Age (in y	vears)—C	Continue	ì.			Place of	residence	
21-30	31-40	41-50	51-60	61-75	76-100	Age un- known	Pan- ama.	Colon.	Canal Zone.	Total.
			1	3	7		9	2	2	1
5						1	2	5	1	
1 5	1 2 1 6	2	1				1 3 2 5	1 2 2 6	1 1 8 1	1
2		1 2	2				6	1 3	5	1
$\begin{bmatrix} 6 \\ 2 \end{bmatrix}$	5 3	1 1		3			10 4 1	4	6 2	20
1 1	1	1					.1		1	1 1 3 1(
6 4	1 3	1	1				3 7 2	3	3	
<u>1</u>	1 1	1			1		1 1	1 2 3	1	8 3 1 3 3
1 1	2			i			5	1	1	2 5
4 2							. 14 1	6	3 1	23
324	313	199	146	97	45	3	1,297	554	242	2,093

Cause of death.	Se	×.	Col	or.	Less than
outle of death.	M.	F.	w.	В.	year.
Typhoid fever. Malarial fever, estivoautumnal.	4 6	1 1	5	6	
Influenza Hemoglobinuric fever, unqualified Septicemia	7	1	6	2	
Tetanus	3			3	
Tuberculosis of the lungs	20	7	7	20 1	
Disseminated tuberculosis Syphilis, tertiary	3 2 2	1	1	4 2	
Syphilis, period not stated.  Cancer and other malignant tumors of the buccal cavity.	2	1	1 1	1	
Cancer and other malignant tumors of the stomach and liver	3	1	1	2	
Cancer and other malignant tumors of the female genital organs		2	1	1	
Cancer and other malignant tumors of other organs and of organs not specified	1	1	1	1	
Anemia, secondary, cause not determined	2		1	1	
Encephalitis. Cerebrospinal fever	1 1			1 1	
Pneumococcus meningitis.  Cerebral hemorrhage, apoplexy  Epilepsy	1		1	1	
Neurasthenia. Pericarditis.	1		î	·····i	
Acute endocarditis. Malignant endocarditis.	1 2	1	1	$\frac{1}{2}$	
Angurysm	12	4	6 1	10	
Arteriosclerosis Hemorrhage; other diseases of the circulatory system	1	1		2	
Diseases of the thyroid body	1		1	1 1	
Broncho-pneumonia	6	1	2	4	
Pneumonia (unqualified) Loba: pneumonia Pleurisy	12		3	9	
Ulcer of the stomach	$\begin{vmatrix} 2\\2 \end{vmatrix}$		1	$\frac{1}{2}$	i
Diarrhea and enteritis (2 years and over)	1 2		2	1	
Inguinal hernia. Other disease of the intestines.	1	1	1 1	1 1 2	
Cirrhosis of the liver Other diseases of the liver Simple peritonitis	1		1 1		
Brights disease (chronic nephritis)	13	3	5	11 1	
Other diseases of the kidney and annexa.  Pyelo-nephrosis.  Cystitis	2			1 2	
Stricture of the urethra, nonvenereal	1	····i		1	
Accidents of laborPuerperal hemorrhage		1 2		1 2	
Eclampsia Phlegmon and cellulitis		1		1	

<sup>&</sup>quot;Includes deaths of all nonresidents, passengers off incoming ships, etc. Deaths of nonresidents

OF NONRESIDENTS."

				Age (ii	ı years).					m ( )
1-4	5-10	11-20	21-30	31-40	41-50	51-60	61-75	Over 75	Un- known.	Total.
		2 1	1	1	1					5
1	1	1 1	$\frac{1}{2}$	1 1 2	·····i	1				5 7 8
		1					1			1
		1	1	1						3
			10	100	4					27
				8 1 2 1	*	*				
1				2		1				1 4 3 2
			2	1						8
• • • • • •			1		1					2
					1					1
										8
						2		1		
				1	1					2
		1	i		2					
		1	i							
		1								
			1							
			1							
			1				1			
							1			
			1							1
			1		1 1					
			4	4	5		2		1	1
				1						
					1		1			
	1	1				1				
					1					
1			1	1 1	1		1			
		1	6	i	1	2	1			1
				2	1					
				2						
î										
			2							
				2 2 2 1	1					
				2		1				
				ī		<b>.</b>	1			
							1			1
		1	3	4	4	3	1			1
	1				ii	1				
						. 2	1			
					1					
			1							
			1		1					
			î							
				. 1	1					

are not taken up in the statistical charts relating to Panama, Colon, and the Canal Zone.

Cause of death.	Se	x.	Co	olor.	Less
Cause of double.	M.	F.	w.	В.	year.
Diseases of the bones Congenital malformations Congenital debility, icterus, and sclerema Premature birth. Malnutrition Senility. Suicide by drowning. Suicide by cutting or piercing instruments. Burns. Absorption of deleterious gases. Accidental drowning. Traumatism by cutting or piercing instruments. Traumatism by fall Homicide by frearms. Homicide by cutting or piercing instruments. Homicide by cutting or piercing instruments. Cause of death not specified or ill-defined.	2 1 1 1 1 7 5 1 1 3 2 1 2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 5 3 1 1 1 2 2 1 1	1 1 1 1 1 1 1 1 2 2 2 1 1 1	1 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Total	164	40	73	131	8

<sup>12</sup> Includes deaths of all nonresidents, passengers off incoming ships, etc. Deaths of nonresidents

## OF NONRESIDENTS12-Continued.

Age (in years).													
1-4	5–10	11-20	21-30	31-40	41-50	51-60	61-75	Over 75	Un- known	Total.			
		2	1 3 4	1 1 1 1 1 1	2	1	1			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
5		13	63	46	35	20	10	2	1	20			

are not taken up in the statistical charts relating to Panama, Colon, and the Canal Zone.

TABLE V.—DEATHS BY NATIONALITY OR NATIVITY, YEAR 1920.

0	Emple	oyees.	Nonem	ployees.	Tot	al.	Grand
Country.	Male.	Female.	Male.	Female.	Male.	Female.	total.
Antigua	6		4	4	10	4	14
AfricaBarbados	38		1 159	134	1 197	135	332
Bolivia	30	1	199	104	197	155	332 1
Bahamas	1		1		2		2
British Guiana			2 4	$\begin{bmatrix} 2\\2 \end{bmatrix}$	2 4	$\begin{array}{c c} 2\\2\end{array}$	4
Chile			39	3	39	3	42
Colombia	8		59	40	67	40	107
Costa Rica	1		9	4	10	4	14
Cuba Curação			4	1 2	4	$\begin{array}{c c} 1 \\ 2 \end{array}$	
Demerara	1		2	4	3	4	-
Dominica			4	1	4	1	į
England			2 6	2 3	2 6	$\frac{2}{3}$	4
Ecuador	2		4	5	6	5	1
Fortune Island	1		1	1	2	1	3
Grenada	5		11	9	16	9	2.
Greece	1 5		3 5	1 4	10	1 5	1
Guadeloupe	J	1	1 1	*	10	9	1
Guatemala	1				ī		
Haiti	1		2 2		3		
Honduras			2 2	1	2 2	1	
Italy	1		8	3	9	3	1
Jamaica	33		247	219	280	219	49
Japan			3	1	3	1	
Martinique Mexico	4		20	24	24	24 2	4
Montserrat	1		5	3	6	3	
Nicaragua			3	1	3	1	
Nassau	1		4	1	5	1	
Norway Panama	26		300	330	326	331	65
Peru	1 1		7	8	8	8	1
Porto Rico				1		1	
St. Kitts	1 5		10	10	1	10	4
St. Lucia			19	16	24 5	16	4
St. Vincent	3		6	4	9	4	1
Scotland			1		1		
Spain. Trinidad	$\frac{1}{2}$		19	5 8	20	5 9	2.1
United States	16	1	33	15	49	15	6
Venezuela	1		4	5	5	5	1
Virgin Islands	1				1		
HollandPoland.				1 1		1	
Palestine				1		1	
Portugal				1		1	
Philippines			1		1		
Santo Domingo			1		1		
Switzerland.			1		i		
Denmark			1		1		
Hungary	1				1		
Grand Cayman				1		i	
Unknown			7	4	7	4	1
						888	2,094
Totals	171	4	1,035	884	1,206		

## TABLE VI.—STATISTICS RE AMERICAN EMPLOYEES AND THEIR FAMILIES.

	Annual death rate per 1,000 population.
White employees from the United States: Disease. External causes.	3.32 .95
Total	4.27
White women and children from the United States: Disease. External causes.	3.80 .72
Total	4.52
White employees from the United States and their families: Disease. External causes.	3.59 .82
Total	4.41

Table VII.—BIRTHS AND BIRTH RATES IN THE CANAL ZONE AND THE CITIES OF PANAMA AND COLON.

71	Average		Births.		Rate per 1,000 population.				
Place.	popula- tion.	Total.	Alive.	Still- born.	Total.	Alive.	Still- born.		
Year, 1920: Panama Colon. Canal Zone.	60,935 26,078 27,459	2,532 1,014 667	2,376 962 631	156 52 36	41.55 38.88 24.29	38.99 36.89 22.98	2.56 1.99 1.31		
Total	114,472	4,213	3,969	244	36.80	34.67	2.13		
Year, 1919: Panama. Colon. Canal Zone. Total.	61,369 26,078 26,511 113,958	2,359 964 732 4,055	2,214 908 695 3,817	145 56 37 238	38.44 36.97 27.61 35.58	36.08 34.82 26.22 33.50	2.36 2.15 1.39 2.09		

TABLE VIII.—INFANT MORTALITY RATES IN THE CANAL ZONE AND THE CITIES OF PANAMA AND COLON.

Place.	Average		Births.		Deaths among children	Death rate per
	tion.	Male.	Fe- male.	Total.	under 1 year of age.	1,000 births.
Year, 1920: Panama Colon Canal Zone	60,500 26,078 27,459	1,150 503 348	1,226 459 283	2,376 962 631	369 137 60	155.30 142.41 95.09
Total	114,037	2,001	1,968	3,969	566	142.61
Year, 1919: Panama. Colon. Canal Zone.	61,369 26,078 26,511	1,190 479 355	1,024 429 340	2,214 908 695	342 141 79	154.47 155.29 113.67
Total,	113,958	2,024	1,793	3,817	562	147.24

## TABLE IX.—DEATHS OF INFANTS BY CAUSE,

Cause of death.	S	ex.	Co	lor.	1	+1 week
Cause of death.	M.	F.	w.	В.	week.	—1 month.
Measles		1		1		
Whooping cough		2		2		
Diphtheria and croup	1	2		1		
Influenza	4	2	1	5		
Dysentery. Dysentery, bacillary.	$\frac{1}{2}$			1		
Pyemia	1			1		
Tuberculosis of the lungs	î	4		5		
Acute miliary tuberculosis	2	1	1	2		
Tuberculous meningitis	1			1		
Disseminated tuberculosis	1	$\frac{2}{1}$		3		
Syphilis, hereditary	8	1	3	1	3	2
Encephalitis	6	1	2	5		
Cerebro-spinal fever.		î		ĭ		
Pneumococcus meningitis	2	î		3		
Cerebral hemorrhage, apoplexy	1		1			
Epilepsy	1	2	; .	1		
Convulsions of infants	1 3	2	1	2 3	1	
Pericarditis.	1			٥		
Acute endocarditis	î	1		2		
Malignant endocarditis		1		1		
Phlebitis	1			1		
Diseases of the lymphatic system (lymphangitis, etc.)		2		2		
Diseases of the larynx	1	1		1		
Laryngitis	19	9	1	27	1	3
Chronic bronchitis.	2		î	ĩ		
Broncho-pneumonia	29	22	8	43	2	
Broncho-pneumonia Pneumonia (unqualified)	2	1		3		
Lobar pneumonia	2	3	1	4		1
Other diseases of the respiratory system (tuberculosis excepted)	1			1	1	
Abscess of lung.	1		1	1	1	,
Ulcer of the stomach	î			1		
Acute gastritis	7	2		9		
Acute indigestion	2	1		3	1	
Diarrhea and enteritis	78	78	16	140	2	9
Colitis	4 3	6	3	7 3		
Cirrhosis of the liver	3	1		1		
Other diseases of the liver	1			i		1
Acute nephritis	4	6	1	9		1
Acute nephritisOther diseases of the kidney and annexa	1			1		
Pyelo-nephrosis	4			4		
Congenital malformations (stillbirth not included)	16	12	3	18 22	10	3 5
Congenital debility, icterus, and sclerema Premature birth	40	30	9	61	64	5
Congenital debility	5	-2	ĭ	6	5	1
Atrophy of infants	1			ĺ		
Malnutrition	23	20		43	2	2
Other causes peculiar to early infancy (including	10	10		0.4	07	
various consequences of labor)	19	16	1	34	27	5
Acute poisonings	1	1	1	1		
Cause of death not specified or ill-defined	4	5	1	8	3	1
Infections of undetermined origin.	i			1		
•						
Totals	321	245	59	507	139	39

## SEX, COLOR, AGE, AND PLACE OF RESIDENCE.

			Ag	e (by	mont	hs).					P	lace of r	esidence.	
1-2	2-3	3-4	4-5	5-6	6-7	7-8	8-9	9-10	10-11	11-12	Panama	Colon.	Canal Zone.	Total.
1		1								1	1 2 1 2 1			1 2 1
				1 1 1		1	2	1		1	1	1	4	6 1 2 1
·····	1	1 1	i	2	1 2						5 2	 1 1	1	1 5 3
2	1	1	1					1	1		2 6 1	3		3 9 1
	2 1 1	1	i	2 		1 1			1		6 1 1	1 1	1	7 1 3
	1					1	1	2			1 3 1		2	3 3
	1		1			1	1				1 1 1 1		1	1 2 1
1	1	1				4		2		2	1 2 1 1 9			1
2	7	4 1	1 6	2 1	6	3	8	2	2	7	43 3 2	19 2 7	1	28 2 51 3 5
i		1			1						2	2 1 1	1	5 1 1
1 11	1 2 	2 1 10	13	7	9	2	2 1 15	24	12	12	1 9 1 119	1 33	1 4	1 9 3 156
	2	2		1	2	1	1	1	1	1 1	8	2 2	1	100 10 3 1
1	1	1			1	1 	1 	1	2	2	17	2 1 1	1	1 10 1 4
1 1 1 1	3			1		1		1	ī		9 14 47	4 9 13	8 10	21 23 70
6	8	1 5	4	3	3	2	4	1	1	2	15	1 15	13	7 1 43
	1 1 1	1 							1 	1 1	21	9	5 1 2	35 1 1 9
31	63	40	33	27	27	32	40	36	27	32	369	137	60	566

-				Emp	oloyees.					
•		Disch	arges			Dea	ths.			
Diseases.	Wh	nite.	Bla	.ck.	w	hite.	Bl	ack.		
		F.		F.				F.		
								-		
General diseases.										
Typhoid fever			2				3			
Typhoid bacillus carrier										
Relapsing fever	1		1							
MalariaEstivoautumnal		8	218	4	3					
Tertian	30	3	62	î						
Quartan			6	· · · •						
Mixed Clinical	1		5							
Cachexia										
Smallpox Varioloid			1							
Vaccina			8							
Measles	2	1	14							
Scarlet fever		1	· · · · i				••••			
Diphtheria and croup			$\hat{2}$							
Diphtheria bacillus carrier		97	414				10			
Influenza	156	27	414			::::	18			
Dysentery, bacillary	1		6							
LeprosyErysipelas										
Chickenpox			25	1						
Mumps		1	9							
Hemoglobinuric fever, unqualifiedYaws										
Filiariasis.			ĩ			]				
Purulent infection and septicemia		1	4							
PyemiaSepticemia				• • • • •						
Pyemia and septicemia, pneumococcic			]							
Tetanus							1			
PellagraTuberculosis of the lungs	4	····i	37	2		::::	13			
Acute miliary tuberculosis			1							
Tuberculous meningits			····i							
Abdominal tuberculosisPott's disease							2			
Tuberculosis of bones and joints										
Tuberculosis of other organs			1							
Tuberculosis of the larynx										

#### OF THE PANAMA CANAL FOR THE YEAR 1920.

			None	mplo	yees							Non	resid	dent	s.																																				
	Disc	harg	es.			D	eath	ıs.		D	ischa	rges	. ′		De	aths.																																			
7	White				,	Whit	e.										es.																																		
Soldiers.	Others		Bla	ck.	Soldiers.	5	Others.	ВІ	Black.		Black.		Black.		Black.		Black.		Black.		Black.		Black.		Black.		Black.		Black.		Black.		Black.		Black.		Black.		Black.		Black.		ite.	Bla	ick.	Wł	ite	Blac	k.	Total discharges.	Total deaths.
М.	М.	F.	M.	F.	M.	М.	F.	M.	F.	М.	F.	М.	F.	M.	F.	М.	F.																																		
	2	1	3	. 4					1	8				4	1			20	9																																
				4						<sub>i</sub>								5 1																																	
										5								7 1																																	
21 12	21 16	20 12	27 13	- 31 26					1	12 10	1	3 2				2	::	411 187	7																																
1				1														8																																	
2	1	2								····i								11																																	
· · · · · · · · · · · · · · · · · · ·	i	4	11	(								1						24																																	
8	30	28	9															8 99																																	
	2	1 3	1 5						1									5	· · · i																																
5	11	. 6	7	14				i i									::	13 45	• • • •																																
32			32	57	3		2	4	11			6		2	::		i	887	4																																
	1	1		12	2			3		11		1:::	1:::		1::		::	26																																	
		1	١						1			3						8 2 7																																	
25										1 2	1	1						90	1																																
	.							1	1									52																																	
			1		2													5																																	
	. 2	1	١ ا		i				1	1	l							12																																	
							2	i										····i																																	
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			3	3 1	2			1			i	· · · i			3			2 92	2																																
		· · · ·			.			4										92 1 2 7 3 4 3	2																																
			i		3					i	i						1::	7																																	
			:	3	3			···i									::	3																																	
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1:::		1	: ::::			1	1:::	1:::	1::::		]::::		1		1::	1::::	1:	1 1	1::																																

				Emp	loyee	8.		
		Disch	arges			De	aths.	
Diseases.					-			
Diseases.	Wl	aite.	Bla	ick.	Wh	ite.	Bla	ck
	M.	F.	М.	F.	М.	F.	М.	F.
General diseases.—Continued.								
Tuberculosis of the lymph glands	1		5 1					
Tuberculous abscess	1						10	
Syphilis: PrimarySecondary	1 2		6					
Tertiary Cerebro-spinal. Hereditary	2 7 13		94 13				1 2	
Period not stated. Gonococcus infection. Gonorrhea.	33		211					
Gonorrheal arthritis Gonorrheal bubo Gonorrheal orchitis and epididymitis			7 2 3					
Gonorrheal ophthalmia	13		2 121					
Adenitis chancroidal.  Cancer and other malignant tumors of the buccal cavity	1		5					
Cancer and other malignant tumors of the stomach and liver, esophagus, and pharynx			3		1			
neum, intestines, rectum.  Cancer and other malignant tumors of the female genital organs.	1		1		1			
Cancer and other malignant tumors of the breast.  Cancer and other malignant tumors of the skin.  Cancer and other malignant tumors of other organs			1					
and of organs not specified	3		3		<b>.</b>		2	
excepted) Acute articular rheumatism Chronic rheumatism and gout	1	.i		i				
GoutArthritis deformansScurvy.								
Diabetes Glycosuria Exopthalmic goiter	2	i						
Leukemia. Hodgkin's disease. Anemia, secondary, cause not determined			i					

OF THE PANAMA CANAL FOR THE YEAR 1920-Continued.

			None	emplo	yees	3.						Nor	ıresi	dent	s.				
	Di	schar	ges.			I	Deat	hs.			ischa	rges			Dea	ths.			
7	White.				v	Vhite	e.											ges.	
Soldiers.	100	Otners.	Bla	ck.	Soldiers.	Othons	· ·	Bla	ack.	Wh	ite.	Bla	ck.	WE	iite	Blac	ek.	Total discharges.	Total deaths.
M.	M.	F.	М.	F.	<u>м</u> .	М.	F.	М.	F.	M.	F.	М.	F.	М.	F.	М.	F.		
1	3	4		. 3														16	
			2 1	1 2				7	6	····· 1				i				2 3 2 3	24
8 11 9	13	 1 7	3 6	1 2 68					 i	16 17 21		3 1 4						36 46 219	2
	6		4 4  1	3 1 13				2		5 1 2 13	11							45 5 5 31	2
20	11		24	5 1 1			 			123 3 2 5		14 1 1						441 12 7 13	
1 5	1 2	.1	12 	5 3			 			125 13		15						11 297 19	
1			2					1		3								. 9	1
3						1	<i>.</i>			1								6	2
····i		<u>2</u>		11 1					1 1	 1								12 3 3	1
			.,			1				1	1			1	٠.			8	4
1	3	4	3	2 2						5 	· · · · · · · · · · · · · · · · · · ·							26 10 3	
  i	1  2	 1  2	 i											···· 1				1 1 1 11	1
	1	2		2														1 1 5	
	2	1		2						2	2							1 15	

,			I	Empl	oyees			
	]	Disch	arges.			Dea	ths.	_
Diseases.	Wh	ite.	Bla	ck.	Wh	ite.	Bla	ck.
	М.	F.	M	F.	М.	F.	М.	F.
General diseasesContinued.								
Other general diseases Purpura hemorrhagica Alcoholism (acute or chronie) Alcoholism, acute Alcoholism, chronic Alcoholism, chronic Alcoholis psychosis Chronic lead poisoning Other chronic occupational poisonings Other chronic poisonings. Drug habit	11 14 3 2		1 2				1	
Diseases of the nervous system and of the organs of special sense.  Encephalitis							1	
Simple meningitis Cerebrospinal fever. Pneumococcus meningitis Locomotor ataxia. Other diseases of the spinal cord.							1 1 2 	
Acute anterior polio-myelitis. Cerebral hemorrhage, apoplexy. Softening of the brain. Paralysis without specified cause. General paralysis of the insane. Other forms of mental alienation.	3		1		1		3 1	
Dementia precox  Manic depressive psychosis.  Toxic psychosis.  Epilepsy.  Convulsions, nonpuerperal (5 years and over).			1 7					
Convulsions, nonpuerperal (5 years and over)		2						
Other diseases of the nervous system. Organic disease of the brain. Tumor of the brain. Neurasthenia Diseases of the eyes and their annexa.	6 1 9	5	8	····i				
Follicular conjunctivitis. Trachoma Cornea. Iris.		· · · · · · · · · · · · · · · · · · ·	2 7 28 17					

## OF THE PANAMA CANAL FOR THE YEAR 1920.-Continued.

			Non	empl	oyee	s.						Nor	resi	dent	ts.				
	Dis	char	ges.			I	Deat	hs.		D	ischa	rges			De	aths.			
N	Vhite.				V	Vhite	е.						_					88	
Soldiers.	Othors		Bla	ick.	Soldiers.	100	Others.	Bla	Black.		hite.	Bla	ıck.	Wh	ite	Blac	ek.	Total discharges.	Total deaths.
М.	М.	F.	M.	F.	М.	М.	F.	M.	F.	М.	F.	М.	F.	м.	F.	М.	F.		
	15	12	4	3						9								12	
5	2		····i		· · · i					2 7 8 5								43 7 30	
11	3								···i	5								35	
3	4		$\frac{1}{2}$			1				2					ļ			13 3	
										ļ <b>.</b>								5	
• • •			1							····i							.:	$\frac{1}{2}$	
										1							• •	1	
				1						2								3	
1					1	2		i	1									3 1 2	
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		:		1				ļ.,		1								·····ż	. · ·
• • • •	· · · · i	···i						1						l:::		1::::		2	
	1			3					4									5	
··;	···i		i	2			1:::			1			i:::					1 12	
3			6		1	4		5					ļ <sub>.</sub>					9	
6 12	3	3	9 22			1				9	2		1		1::			39 69	
1				1	l					1					::			3	
			i	3						1 2								4 14	٠.
		i		3		1:::		1:::		1					1::		::	5	::
	2		1	3		1												5	
1 2	3	3								····								4 19	
1		6 2 5		1 5														8	
1 3	4 4	5	1	5						1 4								38 40	
	1	0		1	1:::		1:::		1::::								::	3	
				l						1								1	
8 19	2 9	7 3	10	12						15		i i	1					60 144	
	1 1		1							. 2	2							7	
5 5 6	1 3						[		····	1		l						15	
5	3	4	4	9						4			1					74 45	

			1	Empl	oyees			
	]	Disch	arges			Dea	ths.	
Diseases.								
	Wh	ite.	, Bla	ck.	Wh	ite.	Bla	ek.
20	М.	F.	M.	F.	М.	F.	М.	F.
Diseases of the nervous system and of the organs of special sense.—Continued.								
Diseases of the eyes and their annexa-Continued:								
LensFundus.			4					
Diseases of the ears	3		···· <del>·</del>	1				
Otitis media	4		7	i				
Diseases of the circulatory system.								
Pericarditis			1					
				;				
Malignant endocarditis	6		12				6	
Angina pectoris			1					
Aneurysm			4				····i	
Arteriosclerosis	1		1				1	
Diseases of the veins (varices, hemorrhoids, phlebitis, etc.)	2		3					ĺ
Hemorrhoids			20	1				
VaricesVaricocele	2 3		1 5					
Phlebitis	1							
Diseases of the lymphatic system (lymphangitis, etc.)  Lymphadenitis (nonvenereal)	12 21		13 41					
Hemorrhage; other diseases of the circulatory sys-	21	1	71					
tem	6		1					
Diseases of the respiratory system.								
Diseases of the nasal fossae	30	11	22					
Adenoid vegetations								
Diseases of the larynx			1					
Laryngitis	1							
Diseases of the thyroid body	23	5	55	3				
Chronic bronchitis	4		2	3				
Broncho-pneumoniaPneumonia (unqualified)	1		2				3	
Lobar pneumonia			17	i	1		1 .2	
Pleurisy	2	1	8 2	1				
EmpyemaPulmonary congestion, pulmonary apoplexy			2					

#### OF THE PANAMA CANAL FOR THE YEAR 1920.-Continued.

				Non	empl	oyee	s.						Noi	resi	dent	s.				
		Di	schar	ges.			ľ	)eat	hs.		I	Discha	rges	3.		De	aths.			
		White	2.			V	Vhit	e.											<b>3</b> 3	
	Soldiers.	Othorn	Outers.	Bla	ack.	Soldiers.	Other	Otners.	Ві	ack.	W	hite.	Bla	ack.	Wh	ite	Bla	ck.	Total discharges.	Total deaths,
	М.	М.	F.	М.	F.	M. —	М.	F.	M.	F.	М.	F.	M.	F.	М.	F.	М.	F.		_
	2 2 17 10	 4 6	1 1 2 7 12	3 2	2 3 2 1 5				2		1 2 10 4								7 8 12 54 55	2
	i	1 1 3 	3	3	1 18 11 11		i 		  i	1 2 2	1  5 1 1	1			i		1		3 3 51 2 3 5 8	1 1 4 9
	2 15 4 9 3 16	1 2 1 1 2 2 2	1 5 1  4 3	1	2 11  1 6 5				i		3 11  1 2 16	1 1	3						16 88 8 19 5 46 120	i
The state of the s	32  14 1	13 9  40 4	17 8  5 41 6	2 5  28 1 4	10 4  3 2 23 3 4					2	7  2 16 6	1	1  2 2 1		i				14 <sup>9</sup> 26 1 1 4 12 250 30 13	12
-	3 6	4 2 1	3 1	11 4 2 1	4 3 1		i		5	5	5 9 1	1	1 1			1	1		49 41 8 1	26.

			1	Emplo	yees.			
10 10	I	Discha	arges.		_	Deat	ths.	
Diseases.	Wh	nite.	Bla	ck.	Wh	ite.	Bla	ck.
	М.	F.	М.	F.	М.	F.	М.	F.
Diseases of the respiratory system—Continued.								
Gangrene of the lungs. Asthma Pulmonary emphysema Other diseases of the respiratory system (tuberculosis	 1 1		13	1				
excepted)	2							
Diseases of the digestive system.								
Diseases of the mouth and annexa.  Diseases of the teeth and gums.  Stomatitis.	3	3	13	1 1				1
Diseases of the pharynx.  Pharyngitis.  Follicular tonsillitis.	3 7 57	30		2				
Ulcer of the stomach. Other diseases of the stomach (cancer excepted) Acute gastritis. Chronic gastritis.	8 4 13 4		4 6 15 7					
Acute indigestion.  Diarrhea and enteritis (under 2 years).  Colitis (under 2 years).	10							
Diarrhea and enteritis (2 years and over)  Colitis (2 years and over)  Ankylostomiasis	11 3 1		4 4 29					
Intestinal parasites Ascariasis Bilharziasis, intestinal	2		9					
Teniasis. Strongyloidosis Appendicitis and typhlitis.	1		1					
Acute appendicitis Chronic appendicitis Hernia, intestinal obstructions	11 17		3		2			
Inguinal hernia Other hernias Intestinal obstruction	20		3	i	i		<sub>1</sub>	
Other diseases of the intestines.  Constipation.  Duodenal ulcer.	21 9 4						····i	
Acute yellow atrophy of the liver. Cirrhosis of the liver. Biliary calculi.	1 2		2		1			

## OF THE PANAMA CANAL FOR THE YEAR, 1920.—Continued.

			Noi	nemp	loye	es.						Non	resid	lents	3.				
	Dis	schar	ges.			D	eath	ıs.		D	ischa	rges.		I	Dea	ths.			
1	White				. V	Vhite	e. 											ges.	
Soldiers.	Othors	Ouncie.	Bla	ck.	Soldiers.		Others.	В1	ack.	WI	hite.	Bla	eck.	Wh	ite	Blac	ek.	Total discharges.	Total deaths.
М.	M.	F.	М.	F.	M.	M.	F.	M.	F.	М.	F.	M.	F.	М.	F.	М.	F.		
3 2	2	···· 7	i	4		i				2 1		2						37 4	1 1
										1 2								2 4	
5 1 1 2 1 7 6 6 3 3 3 1 2 2 1 644 100 11 333 4 4 7 1 1 1 1 1 1	3 2 2 1 1 4 4 4 1 104 4 1 1 2 2 3 3 2 2 1 1 1 1 3 3 2 2 1 1 1 1 3 3 2 2 1 1 1 1 3 3 2 2 1 1 1 1 3 3 2 2 1 1 1 1 3 3 2 2 1 1 1 1 1 3 3 1 1 1 1 1 1 1 1 1 1 1	11 100 25 1188 33 22 11 44 66 55 22 22 11 11 1 299 211 128 8 11 1 128 8 1 1	2 1 1 2 1 2 2 3 3	2 8 8 3 3 2 2 1 1 1000			1	11 33	2	2 5 5 3 2 2 188 2 2 1 1 8 3 3 4 4 1 1 2 5 5 1 1 110 5 5 1 1 25 5 1 1 110 4 4 4 4 4 110 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 7 7 2 2 1 1 1 1 1 1 5 5 3 3 3 3 3 3 3 3 3 3 3 3	2 3 1 		2				21 48 48 5 26 26 23 23 55 66 21 19 22 20 1 3 3 3 3 3 3 3 1 4 5 5 6 6 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 2 2 2 2
3	1 1	8 1	1	1			1	2	1	3	1	i			::			8 14 21	3 2

				Empl	loyees	3		
	1	Disch	arges.			Dea	aths.	
, Diseases,	Wh	ite.	Bla	ck.	Wh	ite.	Bla	ick.
	M.	F.	М.	F.	М.	F.	М.	F.
Diseases of the digestive system.—Continued.								
Other diseases of the liver—Continued: Abscess of liver (unqualified)	1		1					
Abscess of the liver, entamebic	1							
Cholecystitis	4		2	1		i		
Simple peritonitis (nonpuerperal)	2		2					
Other diseases of the digestive system (cancer and tuberculosis excepted)	3	1	3					
Nonvenereal diseases of the genito-urinary system and annexa.								
Acute nephritis	2	] 						
Bright's disease (chronic nephritis)	7	· · · :	20				8	
Other diseases of the kidney and annexa	4	2	1					
Pyelo-nephrosis	5	1	3					
Calculi of the urinary passages  Diseases of the bladder	16	1	$\begin{vmatrix} 2\\2 \end{vmatrix}$					
Cystitis		3		$ \cdots$				
Diseases of the urethra, urinary abscess, etc	3		8					
Stricture of the urethra, nonvenereal	6		24					
Diseases of the prostate					1::::			
Acute prostatitis			1		[			
Chronic prostatitis	3							
Hypertrophy of prostate.  Nonvenereal diseases of the male genital organs								
Nonvenereal diseases of the male genital organs	8		46   12					
Hydrocele Lymph scrotum and varix	1	1		1		1::::		
Uterine hemorrhage (nonpuerperal)		5		i 1				
Uterine tumor (noncancerous)				1 4				
Matritis	1	1	1	1				
Cysts and other tumors of the ovary. Salpingitis and other diseases of the female genital		1						
Organs		.  3						1
Nonpuerperal diseases of the breast (cancer excepted Benign tumor of breast		1::::			1	1		
The puerperal state.					1			
Normal labor		. 1			l			
Accidents of pregnancy				1				
Extra-uterine pregnancy						1		
Abortion	.	.  8		2		1		
Puerperal hemorrhage		J	١	١	1	1	1	١

## OF THE PANAMA CANAL FOR THE YEAR, 1920.-Continued.

			Non	empl	oyee	s.					. :	Noni	resid	lents	١.				
	Dis	charg	ges.			I	Deat	hs.		]	Disch	arge	s.	-	De	aths.			
	White	e.			V	Vhit	e.		8									ses.	
Soldiers.	Other	Omers.	Bla	ek.	Soldiers.	Others.		Bl	ack.	Wi	hite.	Bla	ack.	Wh	ite	Blac	k.	. Total discharges.	Total deaths.
М.	M.	F.	М.	F.	M.	М.	F.	М.	F.	М.	F.	М.	F.	Μ.	F.	М.	F.		
4 2	1	6 3		18			1		····i	1 2 1	1							2 2 21 3 15	1 i
11 33 33 66 33 11 33 22 11 22 11	1 1 1 1 1 6 6 1 1	2 16 2 21 7 7 1 1	22333	77 55 188 1 99 110 11 110 11 11 11 11 11 11 11 11 11 1		i	3	1	3	11 7 7 1 1	1 1 2 2 1 1 2 1 1	3	1	2				222 511 48 55 54 38 66 355 23 31 1 4 4 108 30 11 122 111 34 87 14 3	2244 4 4 1 1 3 3 5
		210 16 3 8 51		121 26 7 15 24 5			1		1		1 1 1							333 43 11 23 86 5	· · · · · · · · · · · · · · · · · · ·

				Empl	loyees			
		Disch	arges.			Dea	ths.	
Diseases.	Wł	nite.	Bla	ck.	WI	nite.	Bla	ick.
	М.	F.	M.	F.	M.	F.	М.	F.
The puerperal state.—Continued.								
Other accidents of labor. Puerperal septicemia. Puerperal albuminuria and convulsions. Eclampsia. Following childbirth (not otherwise defined).								
Puerperal diseases of the breast								
Gangrene Raynaud's disease. Furuncle Carbunole Acute abscess Phlegmon and cellulitis Trichophytosis Scabies. Chiggers (Pulex penetrans). Elephantiasis. Myiasis of skin Dhobie itch Prickly heat. Uleer of the skin Oriental sore (Leishmaniasis). Tropical uleer Impetigo contagiosa Urticaria Ingrowing nail Other diseases of the skin and annexa	100 55 99 222 11 11	3	2 2 34 65 3 3  1 2 8 44 	i			1	
Diseases of the bones and of the organs of locomotion.  Diseases of the bones (tuberculosis excepted) Caries (nontuberculous).  Mastoid abscess. Osteomyelitis. Periositis  Diseases of the joints (tuberculosis and rheumatism excepted) Ankylosis. Arthritis. Synovitis. Other diseases of the organs of locomotion	3  2 4 1 1 7 1 19		1 4  19 2	2			1	

## OF THE PANAMA CANAL FOR THE YEAR, 1920.—Continued.

			No	nempl	loye	es.						Non	resid	lents	3.				
	Di	schar	ges.			I	Deat	hs.		I	Discha	rges			De	aths.			
7	White	).			V	Thite	). 											ges,	
Soldiers.		Others.	Bla	ick.	Soldiers.	Other	Officials.	В	lack.	W	hite.	Bla	ack.	Wh	ite	Blac	ek.	Total discharges.	Total deaths.
М.	М.	F.	М.	F.	M.	M.	F.	М.	F.	М.	F.	М.	F.	М.	F.	М.	F.		
		22 3 2 1 1		15 8 6 4			2 1		3 5		2							39 11 8 1 5	3 1 3 5
2 1 4 5	3 1 7 2	11 5	2 12 6	2  15 4					  1 1	1 1 9 1 8 16	1	  3 2						2 1 32 12 104 127	  1 2
· · · · · · · · · · · · · · · · · · ·	1 2  4	····	2  2	3						1		i						7 9	
1 1 1	7 2	2 1 2 1	 1 3							1 6  3 1		1  1						9 59 1 4 21	
2 4	10	6 10	4							25	····i							19 109	
3 1 1	2 1	3 1 2	1  1 1							1 1 	····i								2
2 3 1 9	2	1 2 6	1 2	4 6 1 3						1 4 1 6	1	2						5 13 2 48 6 78	
5	21	3	10	3		2	1	1	1	2								52	5

## TABLE X.—DISCHARGES AND DEATHS IN THE HOSPITALS

1				Empl	oyees			
	]	Disch	arges.			Deat	hs.	
Diseases.								
	Wł	ite.	Bla	ck.	Wh	iite.	Bla	ck.
	M.	F.	M.	F.	М.	F.	М.	F.
Diseases of early infancy.	-							
Newborn child								
Premature birth								
Congenital debility								
Malnutrition								
Other causes peculiar to early infancy (including various consequences of labor)								
Old age.								
Senility	1							i
Senile dementia	1							
A ffections produced by external causes.								1
Suicide by firearms	1							
Suicide by cutting or piercing instruments								
Poisoning by food	9	1						
Other acute poisonings  Venomous bites and stings	3	1				• • • • •	1	
Burns (conflagration excepted)	8	1					1	
Absorption of deleterious gases (conflagration ex-	Ĭ							
cepted)			6 2					
Traumatism by firearms Traumatism by cutting or piercing instruments	10		114				· · · i	1
Traumatism by fall	27	6			1		1	
Traumatism in mines and quarries							;	
Traumatism by machines	10 11	4	26 54				1	
Traumatism by other crushings			- 1					1
Injuries by animals			2					
Excessive cold			1					
Effects of heat			3					
Lightning								
Electricity (lightning excepted)	1		2					
Homicide by firearms								
Homicide by cutting or piercing instruments Homicide by other means								
Fractures (cause not specified)	5		7					
Dislocations	٠٠٠ ۽	;	3					
Sprains. Other external violence.	35 35		14 247					1
Ill-defined diseases.	00		22.		1			
Ill-defined organic disease								
Sudden death	1		1					
Cause of death not specified or ill-defined	1							
Infections of undertermined origin	14		12 32				2	
No disease	8	1	32	1				
			4		1	1	1	
Totals	1164		3048	58	16	_	114	

## OF THE PANAMA CANAL FOR THE YEAR, 1920.—Continued.

			Nor	nempl	oyee	8.							Non	resio	den	ts.			
	Dis	charg	ges.			D	eath	s.		Г	ischa	rges		I	Deat	ths.			-,
	White	e.		_	W	hite	.											rges.	oć.
Soldiers.	Othors	Concres.	Bla	ck.	Soldiers.	Othora	Contents.	Bl	ack.	Wh	ite.	Bla	ck.	Wh	ite.	Bla	ck.	Total discharges.	Total deaths.
М.	М.	F.	М.	F.	М. —	М.	F.	М.	F.	М.	F.	М.	F.	М.	F.	М.	F.		
	117	110	60 1	63 3					6									350 6	
			<u>i</u>			2 2									::				8 2
	9	···· 4	1 18	6				`i2	10			:::			::			37	22
1			1	3				5	3									5	8
		1	1	····i														3 1	
						$\begin{vmatrix} & & \\ & 2 & \end{vmatrix}$												1	9
3			;							5	2			1				26	1
1	1		3	2														12	i
2	5	3	1 6	1 5			ï	¨i		13		2						. 67	
9	···i		i	3	<sub>i</sub>					<sub>i</sub>								6 17	
15	3 7	. 1	3 26	7	2					6 37		2 5						147 259	j
1																		1	
1 16	8	4	2 13	····i	3	···i				9 8				1	::			49 119	
$\frac{2}{2}$	$\cdots_{i}$		1	1	1			1	1	1					1::			6 7	;
												<sub>2</sub>						1	
···i										1							::	3 5	
				1								l:::		···			1::	1 3	
									2					1		ļ			
					i i									ļ <b>.</b>			1		
5 2	3	1	6	8 2						4	2			1:::			į	42 12	
2 3 27	6	1 2	19	6				1		9 35		5						33 382	1
	1			1				1										2	
	····i										····i							2 2 3	
16 27	6			8 54				i	1	24	l	1						70 313	4
2										24		1						5	
878	848	1417	726	1500	15	33	22	98	119	1121	120	128	2	23	3 2	4	1 1	11224	44

# $\begin{array}{l} {\rm TABLE~XI.-CONSOLIDATED~HOSPITAL~AND~ASYLUM~REPORT.} \\ {\rm (A.=White~Americans;~F.=White~foreigners;~B=Black.)} \end{array}$

	Ja	emai ing nuar 1920	y 1,	A	dmitte	ed.		Die	d.	Di	ischar	ged.
	A.	F.	В.	A.	F.	В.	Α.	F.	B.	A.	F.	В.
Ancon Hospital: Employees Army and Navy patients. Panama pay patients Other pay patients Charity patients	20 49 10	62	56 16	827 1,560 343	989 50	2,882 1,696 318	16	23 1	17	1,539 333	996 53	
Total	103	83	232	3,711	1,185	4,908	33	27	217	3,605	1,194	4,669
Corozal Hospital (insane): Employees. Army and Navy patients. Panama pay patients. Other pay patients. Charity patients.	3	59 4 9	15 209 16 63	1 25 4 2	20 5	66		 8 1	17	24	8 7	11
Total				32	26	112	!	9	23	31		89
Grand total	110	157	535	3,743	1,211	=== 5,020	33	36	240	3,636	1,211	4,758
Corozal farm (cripples): Employees		9			1	11					6	26
Chronic ward: Charity patients			26		1	6			2			2
Colon Hospital: Employees Army and Navy patients. Panama pay patients. Other pay patients. Charity patients.	2	5		289 105 2 412 62	52 17 316 9	526	6	3 17		68 1 323	2	24 347
Total	16	5	21	870		1,431			97		233	728
Palo Seco Leper Asylum: Panama pay patients Charity patients		3	41	· · · · · ·	2	5					1	4 5
Total		4	73		2	9			4		1	9
Grand totals: Employees Army and Navy patients. Panama pay patients. Other pay patients. Charity patients.	20	71	251 70	1 976	197 42 1,310 60	3,606 212 2,238 421	27	11 41	$\frac{37}{162}$	1,206 860 1 1,867 339	$\frac{11}{1.196}$	$\frac{81}{1,930}$
Total	126	175	696	4,613	1,609	6,477	56	57	344	4,323	1,451	5,522

Table XI.—CONSOLIDATED HOSPITAL AND ASYLUM REPORT.—Continued. (A. = White Americans; F. = White foreigners; B. = Black.)

		rans-		De	emair ing ecemb	er			ımber c hospit	
	A.	F.	В.	A.	F.	В.	A.	F.	В.	Total.
Ancon Hospital: Employees	12 5	5 2 1	53 11 18 26	30 63  49 16	6  31 1	86  47 13		10	16	191.88 39.01 .26 166.67 28.60
Total	18	9	108	158	38	146	133.84	61.95	230.63	426.42
Corozal Hospital (insane): Employees. Army and Navy patients. Panama pay patients. Other pay patients. Charity patients.		i	 5	1 1 3 1 2	2  62 1 8	24 196 21 55	.49 2.45 3.00 1.85 .39	60.73	18.96 188.18 16.00 55.06	21.34
Total		1	7	8	73	296	8.18	73.78	278.20	360.16
Grand total		10	115	166	111	442	142.10	136.03	509.30	787.43
Corozal farm (cripples): Employees					4	26		4.87	28.94	33.81
Chronic ward: Charity patients			3		1	25		.46	25.91	26.37
Colon Hospital: Employees. Army and Navy patients. Panama pay patients. Other pay patients. Charity patients.	31 1 84	12 104	369 89 129 17		7	10  1 10 2	1.80 .01 8.82	.14	11.14 	1.86 .95 25.24
Total	167	138	604	9	8	23	16.52	6.59	24.28	47.39
Palo Seco Leper Asylum: Panama pay patients Charity patients					5	30		4.01	32.01	32.89
Total					5	69		4.89	71.35	76.24
Grand totals: Employees. Army and Navy patients. Panama pay patients. Other pay patients. Charity patients.	43 1 89	15 105	105 147	64 3 56	67	236	65.99	64.98 57.02	228.48 90.24	262.69 43.32 296.47 213.25 154.66
Total	185	148	722	175	129	585	158.50	152.64	659.31	970.39

## TABLE XII.—CONSOLIDATED DISPENSARY REPORT.

## EMPLOYEES TREATED IN QUARTERS.

Place.	ma ir Jan	e- in- ig i. 1, 20.	A mit	d- ted.	Di	ed.		Dis- ged.		ns- red.	m i De	Re- ain- ng c. 31, 020.		ays los	t.
	w.	В.	W.	В.	w.	В.	w.	В.	w.	В.	W.	В.	w.	В.	Total.
AnconBalboaPedro Miguel GatunCristobal	3 3 1	i	1,938 2,458 248 211 1,257	32 135 80			2,455 241 202	31 128 76	 8 8		6	8 1  12	4,468 5,474 742 672 3,293	225 403 242	9,799 5,699 1,145 914 11,204
Total	12	34	6,112	3,248		ļ	6,020	3,158	87	103	17	21	14,649	14,112	28,761

## ALL CASES TREATED BUT NOT EXCUSED.

	F	mployee	s <b>.</b>	No	nemploy	ees.		Total.	
Place.	White.	Black.	Total.	White.	Black.	Total.	White.	Black.	Total.
Ancon	14,979 52,079 9,774 4,079 17,307	59,496 18,929 27,270 22,815 37,081	71,008 37,044 26,894	50,572 17,664		65,054 44,413 17,496	102,651 27,438 11,150	33,411 54,019 33,240	
Total	98,218	165,591	263,809	108,147	97,265	205,412	206,365	262,856	469,221

## TABLE XIII.—CONSOLIDATED ADMISSION REPORT.

	White.	Black.	Total.
Admissions to hospitals, excluding Corozal farm and chronic ward.  Admissions of employees to quarters	6,220 6,112	6,460 3,248	12,680 9,360
Total admissions to hospitals and quarters  Less number of patients transferred between hospitals and from quarters to hospitals, whose admissions are dupli-	12,332	9,708	22,040
cated in the above figures	453	738	1,191
Net admissions to hospitals and quarters	11,879	8,970	20,849
EMPLOYEES.			
Employees admitted to hospitals	1,467 6,112	3,595 3,248	5,062 9,360
Total admissions of employeesLess number transferred between hospitals and from quarters to hospitals, whose admissions are duplicated in	7,579	6,843	14,422
the above figures	92	441	533
Net admissions of employees	7,487	6,402	13,889
Annual admission rate per thousand employees to hospitals and quarters	1,597.05	400.50	671.84

# Table XIV.—NUMBER OF EMPLOYEES CONSTANTLY SICK IN HOSPITALS AND QUARTERS.

	White.	Black.	Total.
Hospitals:			٠.
Ancon	41.50	170.95	212.45
Colon	5.29	11.14	16.43
Total	46.79	182.09	228.88
Quarters:			
Ancon	12.20	14.57	. 26.77
Balboa	14.96	. 61	15.57
Pedro Miguel	2.03	1.10	3.13
Gatun	1.83	.67	2.50
Colon.	9.00	21.61	. 30.61
Total	40.02	38.56	78.58

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TABLE XV.—AVERAGE NUMBER OF DAYS IN HOSPITALS OR QUARTERS FOR EACH ADMISSION OF SICK EMPLOYEE,

White.	Black.	Total.
12.38 5.77	19.58 5.69	17.59 5.72
10.85	16.91	15.17
2.38 2.22 2.87	3.33 7.00 3.10	2.82 2.28 2.95
3.24 2.74 2.44	3.01 5.97	3.19 4.40 3.13
	12.38 5.77 10.85 2.38 2.22 2.87 3.24	12.38 19.58 5.77 5.69 10.85 16.91 2.38 3.33 2.22 7.00 2.87 3.10 3.24 3.01

TABLE XVI.—NUMBER OF DAYS HOSPITAL TREATMENT FURNISHED VARIOUS CLASSES OF PATIENTS.

Class.	American.	Foreign.	Black.	Total.
Ancon Hospital:				
Panama Canal employees	10,686 14,239	3,911	55,629	70,226 14,239
Panama Government pay patients	14,239	36	58	14,239
Other pay patients	20,195	17,606	23,038	60,839
Charity patients	3,764	1,072	5,606	10,442
Total	48,884	22,625	84,331	155,840
Corozal Hospital (insane):				
Panama Canal employees	181 893	412	6,940	7,533
Army and Navy patients Panama Government pay patients	1,098	22,166	68.686	893 91.950
Other pay patients	683	1,273	5,835	7,791
Charity patients	142	3,081	20,097	23,320
Total	2,997	26,932	101,558	131,487
Corozal farm (injured employees):				
Panama Canal employees		1,781	10,561	12,342
Chronic ward:				
Charity patients		169	9,457	9,626
Colon Hospital:				
Panama Canal employees	1,575	361	4,079	6,015
Army and Navy patients Panama Government pay patients	679	52	295	679 352
Other pay patients	3,221	1,936	4.055	9,212
Charity patients	559	58	444	1,061
Total	6,039	2,407	8,873	17,319
Palo Seco Leper Asylum (lepers):				
Panama Government pay patients		1,465	14,360	15,825
Charity patients		324	11,682	12,006
Total		1,789	26,062	27,851
Grand totals	57,920	55,703	240,822	354,445

## TABLE XVII.—WARD LABORATORY REPORTS.

	Ancon Hospital.	Colon Hospital.	Santo Tomas Hospital.
lood examinations (total number)	5,656	2,124	2,91
Estivoautumnal	368	158	24
Tertian	157	69	8
Mixed, tertian, and estivoautumnalQuartian.	17 10	$\begin{bmatrix} 9 \\ 2 \end{bmatrix}$	• • • • • • • • • • • • • • • • • • •
Crescents.	9	2	
Spirillum of relapsing fever.	7	6	• • • • • • • • • • •
White blood counts	2,842	560	14
Red blood counts	242	50	
Differential counts	716 3,804	$\frac{261}{381}$	13 79
ool examinations (total number):	6,822	1,855	6.49
Ameba coli	47	5	0, 3
Entameba histolytica	20	10	7
Uncinaria ova	705	105	2,0
Ascaris ova	376 476	62 61	8
Tricocephalus dispar. Bilharzia ova.	4/0	61	1,1
Tinea saginata	7	3	• • • • • • • • • •
Strongyloides	235	35	5
Trichuris	9	8	1
Ciliated monads	57	15	1:
Balantidium coli	12 257	92	9
Pus cells	118	32	1
Pus and blood	93	ī	î
Pus, blood and mucus	40	13	2
Guaiac test for occult blood	139	37	
Clonorchis sinensisrine examinations (total number)	05.000		P 0
	25,698 382	5,385 362	7,6
Acetone	48	302	
Albumin	5,550	1,963	1,6
Sugar	2,328	83	
Bile	457	10	
Guaiac test for occult bloodIndican	42 415	22	8
Sediment	8,674	404	٥
- Epithelial cells	7,600	635	4
Cylindroids	260		2
Hyaline casts	2,624	317	1,0
Granular casts	1,838 840	278 206	9
Pus casts. Pus cells.	8,006	1,927	1,8
Red blood corpuscles.	1,250	468	1,0
Pus and blood	1,250 1,366	12	$\bar{3}$
Gonococci	104	3	
Tubercle bacilli	1	31	
Hemin crystalsunctional kidney tests	14 51	1	
putum (total examinations)	3,988	1,458	1,3
Tubercle bacilli	340	87	2
Pneumococci	5	9	
pinal fluid	405	11	
Smears of sediment	87	1	-
Pneumococcus	1	1	
Streptococcus	8		
Straphylococcus	1		
Other organisms	11	1	
Cell count	351	3	
Ross Jones test	21		

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TABLE XVII.—WARD LABORATORY REPORTS.—Continued.

	Ancon Hospital.	Colon Hospital.	Santo Tomas Hospital.
Smear examinations (total number)	1,101	145	6,455
Urethral	850	98	251
Vaginal	195	12	5,579
Eyes	34	3	18
Nasal	23	4	34
Throat	15	12	940
Others	56	2	34
Pleural fluid			
Flood (for malaria)			
Widal reactions			40
Urobilin	12		

## TABLE XVIII.—SURGICAL OPERATIONS PERFORMED.

	Anc Hospi		Colon Hospital.		Santo T Hospi	
	Num- ber.	Died.	Num- ber.	Died.	Num- ber.	Died.
Amputations:						
Arm			1 1		1	
Forearm	ii		1			
Hip joint					2	
ThighLeg.	4		$\begin{vmatrix} 2\\2 \end{vmatrix}$	2	6	
Foot					2	
Digits, multiple	20		7		15	
Arm, double Operations on bones:					1	
Craniectomy decompressive	3		8	2	1	
Craniectomy, exploratory			2	2		
Bone transplantation, simple Laminectomy	4 2				1	
Ostjectomy	4				2	
Excision of maxila.	1					
Resection of elbow	13		1		3	
Wiring of fractures, compound	2		î		5	
Plating of fractures, simple	4					
Teeth extractions	11					
Cervical	16				18	
Axillary	5				150	
Inguinal, single	254 52		5		158	
Femoral	20				1	
Vaginal					1	
Herniotomy: Inguinal, single	128	1	16		104	
Inguinal, double	37		5		13	
Femoral	4		1		3	
Ventral Combined (any two of above)	23				19	
Strangulated	4	1	4	2	1	
Genito-urinary tract:	1		ļ			1
Nephropexy Cystotomy	4 3				7	
Prostatectomy	2	1				
Urethrotomy, internal	15				50	
Urethrotomy, external Varicocele, radical cure	13 23		2		20	1
Hydrocele, single, radical cure	38		4		22	
Hydrocele, double, radical cure					13	
Orchidectomy Epididymotomy			3		19	
Vasectomy	9					
Amputation of scrotum	2				2	
Amputation of penis Amputation of penis and scrotum	1				20	
Curettage uteri	205		4		117	
Perinepolasty	17		1		43	
Nephrectomy Nephrotomy				1:::::		
Trachelorrhaphy	. 4		1		. 2	
Vaginal punctures	. 4		1			
Vaginal section					23	

## TABLE XVIII.—SURGICAL OPERATIONS PERFORMED.—Continued.

			Colo Hospit		Santo T Hospit	
	Num- ber.	Died.	Num- ber.	Died.	Num- ber.	Died.
Genito-urinary tract—Continued:						
Circumcision	291		1			
Ureterotomy Obstetrical:	1					
Caearian section, abdominal	4	1	2			
High forceps	1					
Low forceps	7		6	1		
Accouchement forceps	3 1		3 6	1		
Version Perineorrhaphy	27				1	
Thorax:					1	
Excision of breast	2		1		2	
Thoraconjusts	8		3			
Thoracoplasty	1					
Hemorrhoids, radical cure	98		5		34	
Fistula in ano, excision of			2		13	
Abscess, Ischio-rectae			1			
Resection of	1					
Thyroidectomy	8	1	1		3	
Varicose veins, excision of	8				4	
Tenorrhaphy			1		2	
Excision of surface neoplasms Stab wounds of soft parts, operation for	4	····i	1			
Extensive injuries soft parts, operation	1 1	1	1			
for	1		1			
Gun shot wounds of soft parts, opera-					3	1
tion for	·····i	····i	9	····i	4	
Plastic operations for chronic peritoni-		1 1		1 -	1	1
tis	1		. 1	j		
Plastic operations for congenital defects	3				1 4	
Plastic operations for effects of disease Skin graft	7 2		$\frac{1}{2}$		16	
Aneurismorrhaphy						
Enterorrhaphy			. 1			
Laparotomy:			5	2	1	1
For general peritonitis	$\frac{1}{3}$		. 3	1 2		]::::::
For intestinal obstruction	i		. 2		. 6	1
Exploratory	.  26		1 4	1	17	
Gastro-enterostomy	4 2	;			. 4	
Entero-enterostomy		1	2			
Appendectomy	167	1	. 24	1	188	
Appendectomy with local peritonitis.	. 9		. 24	3	2	
Appendectomy with general perionitis	. 10	3	6		5 7	
Colostomy	$\frac{1}{3}$		2		. 4	1
Cholecystotomy	. 6		:  ī		. 6	
Cholecystectomy	4				. 8	
Abscess of liver, laparo-hepatotomy	. 1	1		Ţ	. 2	
Abscess of liver, thoraco-hepatotomy.  Splenectomy	. 1	1	. 1		. i	1
Pan-hysterectomy	ii		1 5		. 46	
Supravaginal hysterectomy	. 36		. 5	1	86	
Hysteromyomectomy	. 16		. 1		. 16	
Myomectomy	.  3	J	.) 1	1	., 1	1

## TABLE XVIII.—SURGICAL OPERATIONS PERFORMED.—Continued.

	Anco Hospi		Colo Hospi		Santo T Hospi	
	Num- ber.	Died.	Num- ber.	Died.	Num- ber.	Died.
Laparotomy—Continued: Salpingectomy, double. Salpingectomy, Salpingostomy, single. Salpingostomy, double. Salpingo-oophorectomy. Ovarian cystectomy. Oophorectomy. Suspensio-uteri. Ectopic gestation. General peritonitis. Rupture of liver. Rupture of spleen. Gunshot wound of abdomen. Hematoperitoneum. Mayo bunion operation. Arsphenamine, intravenous. Cauterization. Minor operations, various other. Major operations, various other.	3,619 228 1,579 32	1	16 2 4 13 2 2 4 13 2 2	3 1	30 129 164 17 67 88 8 2 1 1 1 1 806 179	
Total	7,415	14	437	27	2,767	1

# Table XIX.—REPORT SHOWING NUMBER OF OPERATIONS IN THE EYE, EAR, NOSE AND THROAT CLINIC.

## ANCON HOSPITAL.

Cauterization Plastic Polypi, removal Rhinoplasty Sinuses: Ethmoid, simple Ethmoid, radical. Frontal simple Frontal, radical. Maxillary, puncture and irrigation. Sphenoid, simple Spur, removal Submucous resection Tuberinectomy. Maxillary sinus, radical arynx: Adenoidectomy Cleft palate. Peritonsillar abscess Tonsillectomy Uvulectomy. Plastic throat. achea: Tracheotomy.  Santo Tomas Hospital. e: Cataract extraction:— Simple. Combined. Combined. Combined.	ye.	
Linear Conjunctival flap Enucleation Evisceration Evisceration Foreign body, removal Hordcolum, incision Iride-tomy Lachrymal operations: Dilation of ducts Lid operations: Expression of lids Plastic Needling Paracentesis Peryqyium Refractions Sclerotomy Cautery of cornea  Fruncle, incision Foreign boy, removal Mastoid operations: Simple Radical Paracentesis Plastic Polypi, removal Sci Cauterization Plastic Polypi, removal Rhinoplasty Sinuses: Ethmoid, radical Frontal, radical Frontal, radical Maxilary, puncture and irrigation. Sphenoid, simple Frontal, radical Maxillary, sinus, radical Anyux: Adenoidectomy Maxillary sinus, radical Aryux: Adenoidectomy Maxillary sinus, radical Aryux: Adenoidectomy Plastic throat Locaterization Sphenoid, simple Spur, removal. Submucous resection Tuberinectomy Maxillary sinus, radical Aryux: Adenoidectomy Plastic throat Locaterization Locaterization Plastic throat Locaterization Tracheotomy Plastic throat Locaterization Tracheotomy Santo Tomas Hospital.	Cataract extraction:	
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achea: Tracheotomy  SANTO TOMAS HOSPITAL. e: Cataract extraction:— Simple Combined Chalazion, removal.		
achea: Tracheotomy  SANTO TOMAS HOSPITAL. e: Cataract extraction:— Simple Combined Chalazion, removal.	Plastic throat	
SANTO TOMAS HOSPITAL. e: Cataract extraction:— Simple Combined Chalazion, removal	achea:	
e: Cataract extraction:— Simple. Combined Chalazion, removal.	Tracheotomy	
Cataract extraction:— Simple Combined Chalazion, removal	SANTO TOMAS HOSPITAL.	
Cataract extraction:— Simple Combined Chalazion, removal	e	
Simple Combined Chalazion, removal		
Combined Chalazion, removal		
Chalazion, removal	Combined	
	Chologion removal	
	Enucleation Enucleation	

## SANTO TOMAS HOSPITAL-Continued.

Eye—Continued:		
Eviesceration.		3
Foreign body, removal		28
Hordeolum, incision.		9
Tulladament	 	
Iridectomy	 	14
Paracentesis		2
Pterygium	 	19
Refractions	 	- 11
Ear:		
Furuncle, incision		4
Foreign body, removal		12
	 	12
Mastoid operation:		
Simple		6
Radical		1
Polypi, removal	 	3
Nose:		
Cauterization		9
Foreign body, removal		10
		10
Plastic	 	2 9
Polypi, removal	 	9
Submucous resection	 	3
Tubinectomy	 	33
Pharynx:		
Adenoidectomy		17
Cleft palate		2
Delt parate.	 	23
Peritonsillar abscess.		
Tonsillectomy	 	129
Larynx:		
Foreign body, removal	 	6
Trachea:		
Tracheotomy		7

## TABLE XX.—REPORT OF X-RAY DEPARTMENT, ANCON HOSPITAL.

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	CLASSIFICA?	TION OF X-RAY	PLATES USED.		
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## TABLE XXI.—SANTO TOMAS HOSPITAL.

## PATIENTS TREATED.

Class.	Remaining Dec. 31, 1919.	Admit- ted.	Died.	Dis- charged.	Remaining Dec. 31, 1920.
Pay cases.	15 397	980 8,472	36 778	931 7,748	28 343
Total	412	9,452	814	8,679	371

Class.	Number	American.		Other nations.		
	treated.	White.	Black.	White.	Black.	
Pay cases	1,307 13,277	27 28		526 1,530	754 11,779	
Total	14,584	55		2,056	12,533	

Number of days relief furnished patients	
Average number of patients constantly sick	422
Average number of days treatment for each patient admitted	
Cost of subsistence per patient per day	\$0.371
Cost of hospitalization per patient per day	\$1.515

## DISPENSARY REPORT.

Class.	White.	Black.	Total.
Natives treated		6,060 2,605	6,076 2,764
Total	165	8,665	8,840

	Dis- charged.	Died.
Typhoid fever	2	1
Malaria	201	3
Malarial fever, estivoautumnal	146	5
Malarial fever, tertian.	5 5	
Smallpox	119	
Scarlet fever	1	
Whooping cough	4	
Diphtheria and croup	79	4
Influenza	367	17
Dysentery	56	1
Dysentery, entamebic. Leprosy	4	1
Erysipelas	11	
Dengue	3	
Chicken pox	72	
Mumps	1	
Purulent infection and septicemia	35	11
AnthraxTetanus.	9	2
Pellagra.	$\begin{bmatrix} 2\\3\\2 \end{bmatrix}$	3
Beriberi		
Tuberculosis of the lungs	. 80	170
Acute miliary tuberculosis	2	' 1
Abdominal tuberculosis	2 2	
Pott's disease	1 1	1
Tuberculosis of bones and joints.  Tuberculosis of other organs.	16	5
Tuberculosis of the lymph glands.	. 2	
Disseminated tuberculosis	. 2	3
Rickets	. 1	
Syphilis, primary	. 370	21
Syphilis, tertiary	. 74	3
Gonococcus infection	120	1
Gonorrheal arthritis.	108	1
Gonorrheal bubo.	. 20	
Soft chancre	. 121	1
Adenitis chancroidal	. 32	3
Cancer and other malignant tumors of the buccal cavity	. 8	3
Cancer and other malignant tumors of the stomach, liver, esophagus, and	4	2
pharynx	. 5	$\frac{2}{2}$
Cancer and other malignant tumors of the female genital organs	. 7	4
Cancer and other malignant tumors of the breast	.   6	
Cancer and other malignant tumors of the skin	. 2	
Cancer and other malignant tumors of other organs and of organs not spec	. 8	4
fiedOther tumors	14	
Acute articular rheumatism.		
Chronic rheumatism and gout	. 14	
Gout	. 2	
Diabetes	. 2	
Addison's disease	. 1	
Leukemia	. 5	
Other general diseases.	24	
Alcoholism	. 54	
Drug habit	2	
Encephalitis	. 1	
Simple meningitis	3	
Locomotor ataxia		
Other diseases of the spinal cord		

	Dis- charged.	Died.
Softening of the brain		1
Paralysis without specified cause	17	4
Other forms of mental alienation	18	1
Epilepsy. Convulsions of infants.	33	
Hysteria	4	
Neuritis	8	
Other diseases of the nervous system	14	2
Neurasthenia	1	
Diseases of the eyes and their annexa	111	
Diseases of the ears	15	2
Otitis media.	4	
Pericarditis	3	3
Acute endocarditis	3	4
Organic diseases of the heart	33	24
Angina pectoris Diseases of the arteries, atheroma, etc	30	12
Arteriosclerosis	6	
Embolism and thrombosis		1
Diseases of the veins	34	
Hemorrhoids	21	
Diseases of the lymphatic system	87	1
Hemorrhage	2	4
Diseases of the nasal fossae	32	
Diseases of the larynx	3	
Laryngitis.	3	
Diseases of the thyroid body	1 1	
Acute bronchitis	118	6
Broncho-pneumonia	46	25
Pneumonia, unqualified	20	20
Lobar pneumonia	40	26
Pleurisy	24	2
Empyema	2 2	
Gangrene of the lungs	16	
Other diseases of the respiratory system	1	ŧ
Hay fever	2 2	
Diseases of the mouth and annexa		1
Diseases of the teeth and gums	21	2
Diseases of the pharynx Follicular tonsillitis	115 36	
Ulcer of the stomach	5	1
Other diseases of the stomach	47	9
Gastrectasis	3	
Acute gastritis	4	
Diarrhea and enteritis (under 2 years)	29 21	24
Colitis (under 2 years)	28	18
Colitis (2 years and over)	4	1
Ankylostomiasis	135	2
Intestinal parasites	254	3
Strongyloidosis.	108	
Appendicitis and typhlitis Acute appendicitis	111	
Chronic appendicitis	5	
Hernia, intestinal obstructions	144	8
Constipation	59	1
Duodenal ulcer	14	
Cirrhosis of the liver	10 5	4
Biliary calculiOther diseases of the liver	16	6

	Dis- charged.	Died.
Abscess of the liver, entamebic		2
Cholecystitis.	5	
Diseases of the spleen. Simple peritonitis, nonpuerperal.	13	6
Other diseases of the digestive system	6	0
Acute nephritis	3	7
Bright's disease	157	77
Other diseases of the kidney and annexa Pyelo-nephrosis	6	3
Pyelo-nephrosis	1	1
Calculi of the urinary passages Diseases of the bladder	3	
Diseases of the bladder	32	4
Cystitis	52	1
Diseases of the urethra, urinary abscess, etc	44	
Vesico-vaginal fistula.	1	
Diseases of the prostate		
Diseases of the prostate	46	1
Hydrocele	12	1
Uterine hemorrhage, nonpuerperal	3	
Uterine tumor, noncancerous	42 23	2
Other diseases of the uterus	137	1
Metritis. Cysts and other tumors of the ovary.	20	1
Salpingitis and other diseases of the female genital organs	203	3
Nonpuerperal diseases of the breast, cancer excepted	4	
Normal labor	840	
Accidents to pregnancy	157	3
Puerperal hemorrhage	1	3
Other accidents of labor	8	1
Puerperal septicemia	3	1
Puerperal albuminuria and convulsions. Eclampsia	1 1	
Following childbirth, not otherwise defined.	4	
Puerperal diseases of the breast	î	
Gängrene	Ī	1
Furuncle	14	1
Acute abscess	101	1
Phlegmon and cellulitis	5	
Scabies	30	
Elephantiasis. Ulcer of the skin.	175	
Other diseases of the skin and annexa	58	
Diseases of the bones, tuberculosis excepted	56	
Periostitis.  Diseases of the joints, tuberculosis and rheumatism excepted	1	
Diseases of the joints, tuberculosis and rheumatism excepted	19	
Arthritis	1 2	
Amputations		
Congenital malformations.		·
Newborn child.	705	
Icterus and sclerema	87	109
Icterus and scleremaOther causes peculiar to early infancy, including various consequences of		
labor		
Senility	29	
Suicides		
Poisoning by food		
Burns, conflagration excepted.		
Traumatism by firearms	22	
Traumatism by firearms	86	
Traumatism by fall	. 61	
Traumatism by machines		
		1
Traumatism by other crushings		1

	Dis- charged.	Died.
ightning	1	
lectricity, lightning excepted	î	
omicide by firearms		
ractures, cause not specified	34	
prains		
ther external violence	78	
ause of death not specified or ill-defined	 2	
fections of undetermined origin	 5	
o disease	 36	
eigned disease	138	

## $\begin{array}{c} {\bf TABLE~XXII.-COROZAL~HOSPITAL-STATEMENT~OF~COMMITMENTS~AND~DISCHARGES.} \end{array}$

#### COMMITMENTS.

	Male.	Female.
From Canal Zone:		
From Canal Zone: First admission. Second admission. From Panama Government:	62 1	19 2
First admission. Second admission.	46 7	31 2
Totals	116	54

#### DISCHARGES.

	We	ell.	Improved.		Unimproved.		
	Male.	Female.	Male.	Female.	Male.	Female.	
Antigua Barbados Bolivia	1 3	6	1 7	6	1		
Chile. Colombia. England	1 1		2		1		
France. Granada	3	3	1 2 6	8	2		
Martinique Nicaragua Porto Rico	1	1		2	1		
Panama Peru Spain	12	4	6		4		
t. Lucia Jnited States Jenezuela	8 1 2		12	1	11		
Frinidad Furk's Island Sweden Russia	i		1				
Totals	35	15	41	22	22	1	

## TABLE XXIII.—CONTAGIOUS AND INFECTIOUS DISEASES.

## Reported during the year 1920.

	Pana- ma.	Colon.	Canal Zone.	Non- resident.	Total.
Acute contagious conjunctivitis (pink eye)	79 95 41	4 24 37 16	105 37 11	9 3 36	4 217 172 104
Erysipelas Favus Hookworm Influenza Relapsing fever Leprosy Malaria	9 1 313 1 4 100	3 2 482 41	1 473 3 3 3 *3 728	46 5 2 352	19 1 3 1,314 9 9
Measles Meningitis, tuberculous Meningitis, tuberculous Mumps Ophthalmia neonatorum Para-typhoid Pellagra	154 3 21 1 1	89 1 15 3	103 3 73	8 2 3	354 9 112 4 2
Pneumonia Acute anterior poliomyelitis Scarlet fever Septic sore throat Smallpox	175 6 4	56	34 1 3 1	40 2 1	305 9 13 1 25
Tetanus. Tuberculosis. Typhoid fever. Whooping cough.	311 8 4	1 121 9 69	70 2 70	1 105 17	7 607 36 143

 $<sup>^{12}\,576</sup>$  cases sanitated area, 117 cases cattle camps and plantations, 35 miscellaneous unsanitated areas.

## TABLE XXIV.—FORCE REPORT.

	Dece	mber 31, 1	1919.	1918.	
	Gold. Silver. Total.	1919.	1910.		
Chief health office	3 4 11	4 33	3 8 44	3 8 47	48
Health office, Panama. Health office, Colon Ancon Hospital. Colon Hospital	12 14 - 134 25	109 145 226 35	121 159 360 60	164 173 368 55	158 158 338 50
Santo Tomas Hospital Palo Seco Leper Asylum Zone sanitation Corozal Hospital and farm	7 2 5 16	48 138 82	7 50 143 98	6 40 223 113	34 168 114
Dispensaries	244	828	1,072	1.216	1,109









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